Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000010349 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380 .

From:

Account Name : LAW OFFICES OF STEINBERG & ASSOCT

Account Number : 119980000080

: (305)538~2344

Fax Number

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Desc.	47	Address	

REGISTERED AGENT CHANGE HIGHLANDER ORLANDO EQUITIES CORP.

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T. LEWIS

Electronic Filing Menu

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Help

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SENATOR LAW CENTER

#130000103493

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Highlander Orlando Equities Corp.

Name of Corporation

P1200017142

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Alhadeff

Name of Contact Person

The Alhadeff Law Group

Firm/Company

767 Arthur Godfrey Road

Addres

Miami Beach, FL 33140

City/State and Zip Code

mark@alhadefflaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Alhadeff

,,,305

538-2344

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

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SENATOR LAW CENTER

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of
1. The name of t	he corporation: Highlander Orlando Equities Corp
2. The principal	office address: 1680 Michigan Avenue, Suite 913, Miami Beach, FL 33139
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification; 02/20/2012 Document number: P12000017142
5. The name and	street address of the current registered agent and registered office on file with the trnent of State: (If resigned, enter resigned)
	ALHADEFF, MARK ESQ.
	767 ARTHUR GODFREY ROAD
	MIAMI BEACH FL 33140
6. The name and (if changed):	767 ARTHUR GODFREY ROAD MIAMI BEACH FL 33140 street address of the new registered agent (if changed) and /or registered office Fernandez, Jose L. 1680 Michigan Avenue, Suite 913
	Fernandez, Jose L.
	1680 Michigan Avenue, Suite 913
	P.O. Box NOT acceptable Miami Beach, FL 33139
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so it board, or the corporation has been notified in writing of the change.
()	Jose Fernandez Tose Fernandez Printed or typed name and title
I furthér agréa t	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sign	Jennelly 11/13 Date
If signing on be	half of an entity:
Tose	Fernandle Z

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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