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Office Use Only



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COVER LETTER

TO:	Amendment Section Division of Corporations	r'	•	ie.
	JECT: 511 GB RESORTS CORP.			
	UMENT NUMBER: P16000031959	}		
The e	enclosed Statement of Change of Registered Off	fice/Agent and fe	e are submitted for	or filing.
Pleas	e return all correspondence concerning this mat	ter to the following	ng:	
Lan	ce Geller			
	e of Contact Person ace A. Geller, P.A.			
	Company 0 Michigan Ave., #700			
Addro Mia	ess imi Beach, FL 33139			
City/S	State and Zip Code lance@gelleresq.com			
E-ma	ail address: (to be used for future annual rep	ort notification)		
For ti	urther information concerning this matter, pleas	se call:		
Lan	ce Geller	at (<u>305</u>	777-2211	
	Name of Contact Person	Area Co	de & Daytime To	elephone Number
Enclo	osed is a \$35.00 check made payable to the Dep	artment of State.		

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2F045 (04/13)

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

statement of chai	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.	
I The name of the	he corporation; 511 GB RESORTS CORP.	
2. The principal of	office address: 1805 Ponce de Leon Blvd., Ste. 400, Coral Gables, FL 33134	
3. The mailing ac	ddress (if different): N/A	
	poration/qualification: 04/07/2016 Document number: P16000031959	
5. The name and	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	JLG CORPORATE SERVICES INC.	
1805 PONCE DE LEON BLVD., SUITE 400		
	CORAL GABLES, FL 33134	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	
	Lance A Geller, P.A.	
	1680 Michigan Ave., #700	
	P.O Boy NOT acceptable	
	Miami Beach, Fl. 33139	
as changed will		
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
	Franco Montalbetti, President	
	re of an officer or director Printed or typed name and title	
I hereby accept I farther agree t of my duties, an document is hei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performanc d I am familiar with and accept the obligation of my position as registered agent. Or, if thi ng filed merety to reflect a change in the registered office address. I hereby confirm that the back notified in writing of this change.	
	12-9-2020 Date 12-9-2020	
	half of an entity:	
Lance A. Gelle	er, P.A.	
12	* * * FILING FEE: \$35.00 * * *	

Make checks payable to Florida Department of State Mail, to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)