## P18000057727

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## **COVER LETTER**

TO: Amendment Section Division of Corporations Group Hideaway Inc. Name of Corporation 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: Heather Jakubowski Name of Contact Person Group Hideaway Inc. Firm/Company 150 SW Hideaway Place Address Stuart, FL 34994 City/State and Zip Code hgsj@grouphideaway.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Heather Jakubowski Name of Contact Person 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

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

-	•	02. 607.1508, or 617.1508, Florida Statutes, this mized under the laws of the State of Florida	
		tered agent, or both, in the State of Florida.	
1. The name of t	he corporation: Group Hideawa	y Inc.	
2. The principal	office address: 44 SW Hideaway	/ Place, Stuart FL, 34994	
3. The mailing a	ddress (if different): 150 SW Hide	away Place, Stuart FL, 34994	
4. Date of incorp	poration/qualification: 7/2/2018	Document number: P18000057727	
	I street address of the current registered tment of State: (If resigned, enter resign	agent and registered office on file with the ned)	
	Hairy Gay	. —,	
	150 SW Hideaway Place, Stuart FL 34994		
		AN THE	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office		
	Heather Jakubowski	6: 22 ORIDA	
150 SW Hideaway Place, Stuart FL 34994 P.O. Box NOT acceptable			
			The street addre
Such change wa authorized by th	as authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directors or by an officer so officed in writing of the change.	
//-/fi	Se bettel 0	Heather Jakubowski	
I hereby accept I further agree to performance of agent. Or, if thi	my dulies, and I am familiar with and	tutes relative to the proper and complete accept the obligation of my position as registered lect a change in the registered office address. I	
Aceth ( 2/27/2018 )			
J	nature of Registered Agent	Date	
	half of an entity:		
Heather Ja	KUDOWSKI		

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