P9800008709

(Requestor's Name)
(Address)
(Address)
(Cit (Chara (Tia (Dhana 4)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

Amendment Section

TO:

Division of Corporations				
SUBJECT: HS Gateway Holdings, Inc.				
Name of Corporation				_
DOCUMENT NUMBER: P9800008709				
The enclosed Statement of Change of Registered	Office/Agent and	l fee are sul	bmitted for	r filing.
Please return all correspondence concerning this	matter to the follo	owing:		
Robert B. Houston				
Name of Contact Person				•
Firm/Company				DOWNER 13 PH W 06
26755 SW 202 Avenue				SEP -
Address				一点 つ
Homestead, Florida 33031				7/3 P
City/State and Zip Code				
bob@solarbeam.com				1110 F
E-mail address: (to be used for future annual	report notificati	on)		一種であ
For further information concerning this matter, p	olease call:			
Robert B. Houston	at (305	790	62925	
Name of Contact Person	Area	Code & D	aytime Tel	lephone Number
Enclosed is a \$35.00 check made payable to the l	Department of Sta	ite.		
Mailing Address: Amendment Section	Street Add Amendme			

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of cha	e provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statute lunge is submitted for a corporation organized under the laws of the State of <mark>Florida</mark> der to change its registered office or registered agent, or both, in the State of Florida	<u> </u>
1. The name of	f the corporation: HS Gateway Holdings, Inc.	
2. The principal	al office address: 15600 SW 288th Street Suite 307 homestead, Florida 33033	
3. The mailing a	address (if different):	
4. Date of incorp	prporation/qualification: 08/06/1998 Document number: P9800008709	
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Michael J. Marcus	
	15600 SW 288th Street Suite 307	
	Homestead, Florida 33033	20745
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office	2074 SEP 13 F
	Robert B. Houston	是是
	26755 SW 202 Avenue	10 E
	P.O. Box. NOT acceptable	一品の
	Homestead, Florida 33031	
The street address changed will	ress of its registered office and the street address of the business office of its regis III be identical.	stered agent.
Such change wa authorized by the	was authorized by resolution duly adopted by its board of directors or by an office the board, or the corporation has been notified in writing of the change.	er so
	MAN. D. D. C. C. C.	
Signatu	nure of an officer or director Printed or typed name and title	
I further agree of my duties, an document is bei	of the appointment as registered agent and agree to act in this capacity. The to comply with the provisions of all statutes relative to the proper and complete and I am familiar with and accept the obligation of my position as registered agencing filed merely to reflect a change in the registered office address, I hereby con as been notified in writing of this change.	performance it. Or, if this firm that the
Sign	ignature of Registered Agent Date	
	pehalf of an entity:	
Т	Typed or Printed Name	

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