P99000107400

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
- Apasinose Entity (Vallie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filling Officer.

Office Use Only



300182330383

06/21/10--01023--013 **35.0



RAChang

Dc

COVER LETTER

. TO: Amendment Section Division of Corporations
SUBJECT: Kent of Naples, Inc. Name of Corporation
DOCUMENT NUMBER: P 99 000 10 7 400
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:
Name of Contact Person
Name of Contact Person
Kent of Naples, Inc.
14600 Biscayne Boulevard
North Miami Beach, Pl. 33181 City/State and Zip Code
E-mail@ddress: (to be used for future annual report notification)
For further information concerning this matter, please call:
- G-1/- Newman at 305 919-9400 Name of Contact Person at Area Code & Daytime Telephone Number
2. Johnst 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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Kent of Naples, Inc.
2. The principal office address: 14600 Biscayne Boulevard
North Miami Beach, FT. 33181
3. The mailing address (if different):
4. Date of incorporation/qualification: 12/21/99 Document number: 199000107400
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Orly Alexander
248 BAI BAY Drive
Bal Harbour, Fl. 33154
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Orly Hiexander
Orly Alexander 14600 Biscayne Boulevard P.O. Box NOT acceptable
Northy Minmi Beach, FT. 33181
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such charge was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the baard, or the corporation has been notified in writing of the change.
- [] Neuman, CEO
I hankly goognet the appointment as registered open and agree to get in this capacity.
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
() UN Ulyand 6/14/2010
Signature of Registered Agent Date
If signing on behalf of an entity: (1) (G. Alexander)
Typed or Printed Name

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