## V 53398

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP  WAIT  MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Re	questor's Name)	
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S. YOUNG



## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: SOUTHGATE SHOPPING CENTER, INC.
Name of Corporation
DOCUMENT NUMBER: V53398
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:
MELISSA SEGRC
Name of Contact Person
THE SEMBLER COMPANY
Firm/Company
5858 CENTRAL AVENUE, 2ND FLOOR
Address
ST. PETERSBURG, FL 33707
City/State and Zip Code
MELISSA.SEGRC@SEMBLER.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MELISSA SEGRC 21 ( 727 ) 344-8156
MELISSA SEGRC at (727 ) 344-8156  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

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

statement of change is submitted	for a corporation organized under the laws of the State of FLORIDA
	gistered office or registered agent, or both, in the State of Florida.  SOUTHGATE SHOPPING CENTER, INC.
1. The name of the corporation:	
2. The principal office address:	3333 S. ORANGE AVENUE, SUITE 201
	ORLANDO, FL 32806
	nt):
4. Date of incorporation/qualifica	tion: 07/23/1992 Document number: V53398
5. The name and street address of Florida Department of State: (1	
	CROSSMAN & COMPANY  3333 S. ORANGE AVENUE, SUITE 201
	3333 S. ORANGE AVENUE, SUITE 201
	ORLANDO, FL 32806
6. The name and street address of (if changed):	ORLANDO, FL 32806  The new registered agent (if changed) and /or registered office  State of the new registered agent (if changed) and /or registered office  State of the new registered agent (if changed) and /or registered office
***	DARLENE S. HARKER
	5858 CENTRAL AVENUE, 2ND FLOOR
<del></del>	P.O. Box. NOT acceptable
	ST. PETERSBURG, FL 33707
The street address of its registere as changed will be identical.	ed office and the street address of the business office of its registered agent.
Such change was authorized by authorized by the board, or the c	resolution duly adopted by its board of directors or by an officer so orporation has been notified in writing of the change.
Signature of an officer or direct	<u> </u>
I hereby accept the appointment I further agree to comply with th of my duties, and I am familiar w document is being filed merely to corporation has been notified in	as registered agent and agree to act in this capacity, we provisions of all statutes relative to the proper and complete performance with and accept the obligation of my position as registered agent. Or, if this preflect a change in the registered office address, I hereby confirm that the writing of this change.
_ O XIRIL	10/9/20 Date
Signature of Registered As	gent Date
If signing on behalf of an entity:	
Darlene S. He Typed or Printed Name	rker
Typed or Printed Name	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 (104/13)

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