N8490000698

(Re	equestor's Name)		
Paul A. McKenna & Associates, P.A. – 1360 S. Dixie Highway Suite 100 Coral Gables, FL 33146			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
	siness Entity Nan	20/	
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(Do	cument Number)	·	
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
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SECRETARY OF STATE

ALLEAHASSEE, FLORIDA

I. LEMEUX

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge 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.	
1. The name of t	the corporation: VILLAS AT CARMEL CONDOMINIUM NO. 2 ASSOCIATION, IN	VC.
2. The principal 381 N. Kr	office address: c/o Alton Madison Prop Mgmt rome Avenue, Suite 205, Homestead, Florida 33064	
3. The mailing a	address (if different):	- -
4. Date of incorp	poration/qualification: 07/29/2003 Document number: N0300006484	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Kaye Bender Rembaum, PL	
	1200 Park Central Blvd South	
	Pompano Beach, Florida 33064	
Pompano Beach, Florida 33064 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	Paul A. McKenna & Associates, P.A.	E D
	1360 South Dixie Highway, Suite 100	
	P.O. Box NOT acceptable Coral Gables, Florida 33146	
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.	
Significant	Mark J. Minervino, President Printed or typed name and title	
I hereby accept I further agree performance of	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 my dulies, and I am familiar with and accept the obligation of my position as registered its document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
Sig	2// 1/23/2015 snature of Registered Agent Date	
	chalf of an entity:	
0 1	McKena Typod or Printed Name	

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