N040000606061

(R	Requestor's Name)
(A	Address)
(A	Address)
(0	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(E	Business Entity Name)
(C	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer: VULUTED BY CAUCE

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

RA CRB

COVER LETTER

SUBJECT: Silver Falls Townhomes Owner's Assoc., Inc. (Name of Corporation)	
DOCUMENT NUMBER: NO400006061	
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:	
Mark Poffenbargar (Name of Contact Person)	
Century Management Services, Inc. (Firm/Company)	
1495 North Park Drive (Address)	
Weston, FL 33306 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Mark Poffenbarger at (954) 349-8777 (Area Code & Daytime Telephone Number)	

Enclosed is a \$35.00 check made payable to the Department of State.

Amendment Section Division of Corporations

TO:



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: Silver Falls Townhomes Quners Assoc. Inc.
2. The principal office address: 1495 North Park Drive
Weston, FL 333QL
3. The mailing address (if different): N
4. Date of incorporation/qualification: 417195 Document number: NO400000000
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Paul Valyo Es 8
951 Broken Sound PKwy, Suite 108
Boca Raton, FL 33487
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
<u>Century Management Services, Inc.</u> §
1495 North Park Drive (P.O. Box NOT acceptable)
Weston, FL 33326
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 change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of Lag officer or director) Silvi A Toe 108 (Rese 1) (Printed or typed name and title)
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 posified in writing of this change.
(Signature of Registered Agent) 3/25/DS (Date)
If signing on behalf of an entity:
MARK TOFFENBARGAR (Typed or Printed Name)

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