

735397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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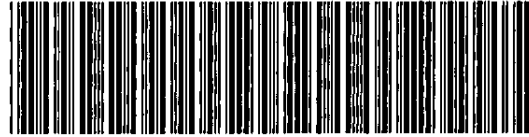
(Business Entity Name)

(Document Number)

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T. LEMIEUX

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Kendall Heights Community Association, Inc  
Name of Corporation

**DOCUMENT NUMBER:** 735397

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:

Angela Aspra  
Name of Contact Person

Advance Management Solutions, Inc  
Firm/Company

9010 SW 137 Ave Suite 231  
Address

Miami, FL 33186  
City/State and Zip Code

KendallHeightscommunity@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela Aspra at (305) 383 7132  
Name of Contact Person Area Code & Daytime Telephone Number

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: Kendall Heights Community Association, Inc
2. The principal office address: 9010 SW 137 Ave Suite 231  
Miami, FL 33186
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 04/01/2011 Document number: 735397

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)

CUEVAS, Ortiz + Cubas, P.A  
7480 SW 40 Street Suite 600  
Miami, FL 33155

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Advance Management Solutions, Inc  
9010 SW 137 Ave Suite 231  
P.O. Box NOT acceptable  
Miami, FL 33186

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
APPROVED  
FILED

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]  
Signature of an officer or director

Angela Aspra - Resident  
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 notified in writing of this change.

[Signature]  
Signature of Registered Agent

2/17/2012  
Date

If signing on behalf of an entity:

Angela Aspra  
Typed or Printed Name

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