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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: Villagio Condominium Association, Name of Corporation	nc.
DOCU	MENT NUMBER: N0300008485	
The en	closed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.
Please	return all correspondence concerning this matter to the fo	ollowing:
Kevin T. Wells, Esq. (Name of Contact Person)		
	(Name of Contact Fer	son)
	The Law Offices of Kevin (Firm/Company)	T. Wells, P.A.
22 S. Links Avenue, Suite 301 (Address)		
	Sarasota, Florida (City/State and Zip Co	a 34236
For fur	ther information concerning this matter, please call:	
	Kevin T. Wells, Esq. at ((Name of Contact Person) (A	941) 366-9191 Area Code & Daytime Telephone Number)
Enclos	ed 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: Villagio Condominium Association, Inc.		
2. The principal office address: c/o Lighthouse Management & Realty, Inc., 16 Church Street,		
Osprey, Florida 34229		
3. The mailing address (if different): c/o Lighthouse Management & Realty, Inc., 16 Church Street,		
Osprey, Florida 34229		
4. Date of incorporation/qualification: 10/01/2003 Document number: N0300008485		
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)		
Dellcor Management, Inc.		
310 Pearl Avenue		
Sarasota, Florida 34243		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
Kevin T. Wells, Esq., The Law Offices of Kevin T. Wells, P.A.		
22 S. Links Avenue, Suite 301		
(P.O. Box NOT acceptable)		
Sarasota, Florida 34236		
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 an officer or director) When the state of		
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 of Registered Agent) Q-10-09 (Date)		
If signing on behalf of an entity:		
Kevin T. Wells (Typed or Printed Name)		

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