

1050000 3603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

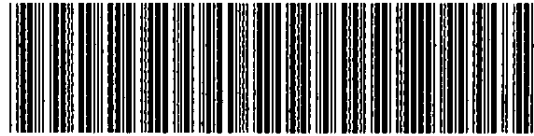
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700131679147

06/26/08--01014--012 \*\*35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 JUN 26 AM 8:36

FILED

*TD*  
*62205*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: Villas Del Sol At Kissimmee Condominium  
(Name of Corporation) Association, Inc.

DOCUMENT NUMBER: NO5000003603

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:

Isamarie Rojas  
(Name of Contact Person)

Continental Group Inc.  
(Firm/Company)

2250 N. Hoagland Blvd.  
(Address)

Kissimmee, FL 34741  
(City/State and Zip Code)

For further information concerning this matter, please call:

Isamarie Rojas at (407) 932-7120  
(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: Villas Del Sol At Kissimmee Condominium Assoc Inc.  
2. The principal office address: 2250 N. Highland Blvd.  
Kissimmee, FL 34741  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 4/07/2005 Document number: NO5000003603

5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State:

Teresita Caballero  
2223 S.W. 153 Path  
Miami, FL 33185

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

Teresita Caballero  
11890 SW 8th Street, Suite 207  
(P.O. Box NOT acceptable)  
Miami, FL 33184

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.

Teresita Caballero, President Teresita Caballero President  
(Signature of an officer or director) (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.

Teresita Caballero  
(Signature of Registered Agent)

5-21-08  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

2008 JUN 26 AM 8:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED