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SECRETARY OF STATE
ANALYSEE FLORIDA

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COVER LETTER

Division of Corporations		
SUBJECT: Villas del Sol At Kissimmee Condominiu	m Association Inc	
(Name of Corporation	n)	
DOCUMENT NUMBER: N05000003603		
	10 00	
The enclosed Statement of Change of Registered Office/Agent a	nd fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	llowing:	
Alejandro Espino, Esquire		
(Name of Contact Person)		
Peterson & Espino, P.A. (Firm/Company)		
(Firm/Company)		
10631 Southwest 88th Street, Suite 220)	
(Address)		
Miami, Florida 33176		
(City/State and Zip Co	de)	
For further information concerning this matter, please call:		
	070.0770	
Alejandro Espino, Esq. at (30) (Name of Contact Person)	270-3773 rea Code & Daytime Telephone Number)	
(Name of Contact Person) (A)	rea Code & Daytime Telephone Numbery	
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address:	Street Address:	
Mailing Address: Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	

TO:

Amendment Section

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

statement of change is	ions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this submitted for a corporation organized under the laws of the State of Florida ange its registered office or registered agent, or both, in the State of Florida.
1. The name of the cor	poration: Villas del Sol at Kissimmee Condominium Association, Inc.
2. The principal office	address: 2250 North Hoagland Boulevard, Kissimmee, Florida 34741
3. The mailing address	s (if different):
4. Date of incorporation	on/qualification: 04/07/2005
5. The name and street Florida Department	t address of the current registered agent and registered office on file with the of State:
Katz	man, Garfinkel & Berger
529	7 West Copans Road
Mar	gate, Florida 33063
6. The name and street (if changed):	t address of the new registered agent (if changed) and /or registered office
Pete	erson & Espino, PA
106	31 Southwest 88th Street, Suite 220
Miar	(P.O. Box NOT acceptable) mi, Florida 33176
The street address of as changed will be ide	its registered office and the street address of the business office of its registered agent, entical.
Such change was authauthorized by the boa	norized by resolution duly adopted by its board of directors or by an officer so rd, or the corporation has been notified in writing of the change.
Il vesita (Signature of an	Caballer Teresita Caballero Iresident
I hereby accept the ap I further agree to cop of my duties, and I an document is being file corporation has been	oppointment as registered agent and agree to act in this capacity. Supply with the provisions of all statutes relative to the proper and complete performance Figuraliar with and accept the obligation of my position as registered agent. Or, if this ad merely to reflect a change in the registered office address, I hereby confirm that the notified in writing of this change.
A Grand	10 - 19 - 1/ 51 Registered Agenti (Date)
If signing on behalf o	/()
Alejandro (Typed or	Espino Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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