N05000004558

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	₩ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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07/29/25-+01029--008 **35.00



COVER LETTER

	Amendment Section Division of Corporations	
SUBJEC	KENSINGTON SOU	JTH CONDOMINIUM ASSOCIATION, INC
Name of	Corporation	
DOCUM	1ENT NUMBER:	N05000004558
The enclo	osed Statement of Change of Reg	gistered Office/Agent and fee are submitted for filing.
Please re	turn all correspondence concerni	ng this matter to the following:
Garry Gri	iffin	
Name of	Contact Person	
Bosshard	t Property Management	
Firm/Cor	mpany	
5522 NW	⁷ 43rd St	
Address		
Gainesvil	lle, FL 32653	
City/Stat	e and Zip Code	
	custome	rservice@bosshardtcam.com
E-mail a	iddress: (to be used for future	annual report notification)
		·
For furth	er information concerning this m	natter, please call:
	Garry Griffin	at (352) 240-2713
	Name of Contact Person	at (332) 240-2713 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

2. The principal o			JTH CONDOMINIUM ASSO	, 0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	ffice address:	55	22 NW 43rd Street	
	2. The principal office address.		uinesville, FL 32653	
3. The mailing ad-	dress (if different):	SA	ME AS ABOVE	
			Document number:	N05000004558
5. The name and s	street address of the		ent and registered office on f	
(c/o Guardian Associa	ntion Managment		
:	10000 SW 52nd Ave	- Links Clubhouse		<i>≈ Ø</i>
- (GAINESVILLE, FL	32608		0025 JUL 29
6. The name and s (if changed):	reet address of the new registered agent (if changed) and /or registered of			?-> <u>-</u>
-	Bosshardt Property M	fanagement		AM 10: 42 OF STATE OFF, FL
÷	5522 NW 43rd Street	ı		ATE ATE 24
-	P.O. Box NOT acceptable			
_	Gainesville, FL 3348	<u> </u>		
The street address as changed will b	s of its registered o e identical.	ffice and the street ac	ldress of the business office	e of its registered agent,
Such change was authorized by the	authorized by reso board, or the corpo	olution duly adopted boration has been noti	by its board of directors or lifed in writing of the chang	by an officer so e.
Ham	Million	み	Garry Grif) Tin
	of an office or director	<u> </u>	Printed or typed nam	
I hereby accept II I further agree to of my duties, and document is being corporation has I	ie appointment as i comply with the pr I am familiar with g filed merely to rej been notified in wri	registered agent and rovisions of all statut and accept the oblig flect a change in the ting of this change.	agree to act in this capacity es relative to the proper an ation of my position as regi registered office address, I	v. d complete performance istered agent. Or, if this hereby confirm that the
dam	of Million	17	06/25/20	25
Signa	tire of Registered Agent		Date	
If signing on beha	ılf of an entity:			

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

DATE:	06.30.2025				
ASSOCIATION:	Kesington South Condo				
INVOICE#	62025				
GL CODE:	07440				
CHECK REQUISTION					
CHECK AMOUNT	\$35.00				
	Amendment Section Division				
PAY TO VENDOR	of Corp				
ADDRESS	PO Box 6327				
CITY / STATE / ZIP	Tallahassee, FL 32314				
FOR (BUSINESS PURPOSES					
	GIVE TO NORA				
CHECK DISTRIBUTION:	US MAIL _ PICK UP				
	DROP OFF				
SPECIAL INSTRUCTIONS					
DUE DATE APPROVED BY					

. . . .