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(Re	equestor's Name)	
(Ad	ldress)	
(Address)		
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PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Montura Homeowners Association Inc. (Name of Corporation)		
DOCUMENT NUMBER: NOS 0000 0 95 65		
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:		
Myra Rando Oh (Name of Confact Person)		
Community Management Concepts		
7400 Bay meadows Way, Suite 317		
Sacksonville, FL 32256 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Myra landolph at 904 367-8532 (Area Code & Daytime Telephone Number)		
(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: Montura Homeowners Association, Inc.
2. The principal office address: 1/363 San Jose Blvd, Suite 102
Tacksonville, FL 32223
3. The mailing address (if different): 7400 Bay meadows Wey Suite 317 &
Jacksonville 32256
4. Date of incorporation/qualification: 405/2007 Document number: N 0500 6007565
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Randall Briley RECERTED OFT 1 4 20018
135 Professional Drive Suite 101
Ponk Vedra Beach, FL 32082
- 1011 Millia Beach 1 520 02
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed): Myra Randolph Community Management Concepts, Fre
7400 Bay Meadows Way, Suite 317
(P.O.Box NOT acceptable)
acusonville, PL 32256
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.
(Syprature of an officer or director) Separature 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 potified in writing of this change.
My a Yan! 9/25/08
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:
Myra Kand J/M
(Typed or Printed Name)

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