## NOU 0000 10558



(Re	equestor's Name)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
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Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			

Office Use Only



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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Villas of West Melbourne Condominiu	n Association, Inc.	
Name of Corporation		
DOCUMENT NUMBER: N06000010558		
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:	
Lisa Russell		
Name of Contact Person		
Vesta Property Services		
Firm/Company		
2350 Dairy Road		
Address		
West Melbourne, Florida 32904		
City/State and Zip Code		
info-sc@vestapropertyservice	es.com	
E-mail address: (to be used for future annual	report notification)	
For further information concerning this matter, p	olease call:	
Lisa Russell	321-241-4946	
Name of Contact Person	at (321-241-494()  Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the	Department of State.	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
istration of Corporations stream of Corporations		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta inge is submitted for a corporation organized under the laws of the State of Flo r to change its registered office or registered agent, or both, in the State of Flor	rida	<u>-</u>
1. The name of t	he corporation: Villas of West Melbourne Condominium Association, Inc.		
2. The principal	office address: 2350 Dairy Road, West Melbourne, Florida 32904		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: Document number:		
	I street address of the current registered agent and registered office on file with timent of State: (If resigned, enter resigned)	the	
	Leland Management, Inc. (Resigned 7/11/24)		
	6972 Lake Gloria Blvd	<u>;</u>	<u> </u>
	6972 Lake Gloria Blvd Orlando, Florida 32809		5 C :
6. The name and (if changed):	Orlando, Florida 32809  I street address of the new registered agent (if changed) and /or registered office.  Vesta Property Services TNC	:	10 13 BT 03 14 05
	Vesta Property Services, INC	:	ċ.
	2350 Dairy Road	<del>-</del> آ	_:
	P.O. Box NOT acceptable West Melbourne, Florida 32904		
The street addre	ess of its registered office and the street address of the business office of its rebe identical.	egist	ered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	ficer	so
Signatin	The off an office of director South Miles as A Printed or typed name and title	ge	Λ <del></del>
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complet I am familiar with and accept the obligation of my position as registered a ng filed merely to reflect a change in the registered office address. I hereby to been notified in writing of this change.	ete p gent confi	verformance . Or, if this rm that the
Hall sign	lossistered Agent 10 S 2024  Date		
If signing on be	half of an entity:		
459	Sped of 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 (04/L3)