

N16 0000004784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

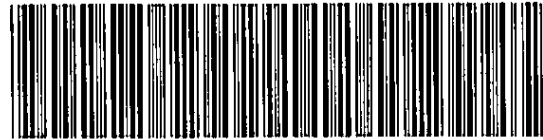
(Business Entity Name)

(Document Number)

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

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RA & RO  
change

08/23/21--01015--025 \*\*35.00

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2021 AUG 23 PM 1:02  
SECRETARY OF STATE  
TALAMASSEE, FLORIDA

SEP 02 2021  
A RAMSEY

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MILLSTONE SOUTH HOMEOWNERS ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N16000004784

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:

TIM SUNDERLAND

Name of Contact Person

TOWERS GROUP REALTY & MANAGEMENT

Firm/Company

928 E. NEW HAVEN AVENUE

Address

MELBOURNE, FLORIDA 32901

City/State and Zip Code

TimS@towersmgmt.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TIM SUNDERLAND

Name of Contact Person

at (321

) 733-3382

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

**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: MILLSTONE SOUTH HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 928 E. NEW HAVEN AVE., MELBOURNE, FL 32901
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 5/11/2016 Document number: N16000004784
5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State: (If resigned, enter resigned)

ARIAS BOSINGER, PLLC

845 E. NEW HAVEN AVE.

MELBOURNE, FL 32901

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

KAYE BENDER REMBAUM, P.L.

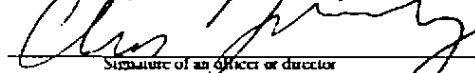
1200 PARK CENTRAL BLVD., SOUTH

P.O. Box NOT acceptable

POMPANO BEACH, FL 33064

The street address of its registered office and the street address of the business office of its registered agent,  
as changed will be identical.

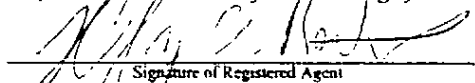
Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

CHRIS ZAVEZKY, PRESIDENT

\_\_\_\_\_  
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.

  
\_\_\_\_\_  
Signature of Registered Agent

8/18/2021  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

KAYE BENDER REMBAUM, P.L.

\_\_\_\_\_  
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 (04/13)

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