## N19250

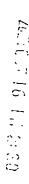
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Opecial instructions to 1 imig Officer.					
-					

Office Use Only



200437780732

10/18/24--01019--028 \*\*35.00



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

OWNERS ASSOCIATION, INC.
N19250
ed Office/Agent and fee are submitted for filing.
is matter to the following:
<del></del>
vice@bosshardcam.com
al report notification)
,
. please call:
at ( 352 ) 240-2713
Area Code & Daytime Telephone Number
- 1

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

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	inge is submitted for a c	corporation organiz	. 607.1508, or 617.1508, F red under the laws of the S ed agent, or both, in the Si	tate of Florida
2. The principal	office address:	WESTBURY HOMEOWNERS ASSOCIATION, INC. 5522-B NW 43rd Street, Gainesville, FL 32653		
3. The mailing a	iddress (if different):			
4. Date of incoη	poration/qualification:	10/01/2024	Document number:	N19250
5. The name and		urrent registered ago	ent and registered office or	
	Leland Management			
	6972 Lake Gloria Blvd	l		`
	Orlando, El 32809			•
6. The name and (if changed):	l street address of the n	ew registered agent	(if changed) and /or regist	tered office.
	Bosshardt Property Ma	-		
	5522-B NW 43rd St		NOT acceptable	
	C : 21 DI 22/52	P.O. Box 3	NOT acceptable	
	Gainesville, FL 32653			<del></del>
The street address changed will	ess of its registered off be identical.	ice and the street ac	ddress of the business off	ice of its registered agent.
Such thange wa	as authorized by resolute board, or the compor	ation duly adopted bation has been noti-	by its board of directors of fied in writing of the char	or by an officer so nge.
/-Jm	re of an officer or director	<u>-</u>	Garry Printed or typed no	Criffic
I further agree of my duties, and document is bei	the appointment as re to comply with the pro id I am familiar with a ing filed merely to refl s been notified in writi	visions of all statut and accept the oblig ect a change in the	agree to act in this capac es relative to the proper o ation of my position as re registered office address,	vity, and complete performance egistered agent. Or, if this I hereby confirm that the t
Sig	nature of Registered Agent	<u>/</u>	10 8 Date	2024
69	chalf of an entity:			

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