I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

PS

Title	PS	Title	S
Name	OCAMPO, DORIS M	Name	APABLAZA, LILIAM
Address	1400 NE 169ST #104	Address	1400 NE 169 ST #214
City-State-Zip:	N. MIAMI BCH. FL 33162	City-State-Zip:	N MIAMI BCH FL 33162
Title	Т	Title	V
Name	CONTRERAS, AMERICA	Name	MENDOZA , EDUARDO
Address	1400 NE 168TH STREET #312	Address	1531 WASHINGTON ST.
City-State-Zip:	NORTH MIAMI BEACH FL 33162	City-State-Zip:	HOLLYWOOD FL 33020

	The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE:				
Electronic Signature of Registered Agent					
Officer/Director Detail :					
Title	PS	Title	S		
Name	OCAMPO, DORIS M	Name	APABLAZA, LILIAM		
Address	1400 NE 169ST #104	Address	1400 NE 169 ST #214		
City-State-Zip:	N. MIAMI BCH. FL 33162	City-State-Zip:	N MIAMI BCH FL 33162		

OCAMPO, DORIS M

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: FOUNTAINVIEW ASSOCIATION INC #3, A CONDOMINIUM

1400 N.E. 169TH ST. BLDG 3 NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

DOCUMENT# 707385

1400 N.E. 169TH ST. BLDG 3 NORTH MIAMI BEACH, FL 33162 US

Current Principal Place of Business:

Name and Address of Current Registered Agent:

N. MIAMI BCH., FL 33162 US

1400 N.E. 169TH ST.

#104

FEI Number: 59-1114982

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

04/15/2019 Date

Date