13501 SW 128 MIAMI, FL 331				
Current Mai	ling Address:			
	28 STREET #216 33186-5863 US			
FEI Number: 59-1809148			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
BUNETTA, SUE 13501 SW 128 MIAMI, FL 3318	STREET #216			
The above named	l entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	rida.
	entity submits this statement for the purpose of changing its regis SUE BUNETTA	tered office or regis	tered agent, or both, in the State of Flo	rida. 02/10/2023
		tered office or regis	tered agent, or both, in the State of Flo	
	Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flo	02/10/2023
SIGNATURE	Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flo	02/10/2023
SIGNATURE	E: SUE BUNETTA Electronic Signature of Registered Agent			02/10/2023
SIGNATURE Officer/Direc Title	Electronic Signature of Registered Agent Ctor Detail : PD	Title	STD	02/10/2023
SIGNATURE Officer/Direc Title Name	Electronic Signature of Registered Agent Ctor Detail : PD BALKIN, RALPH 13501 SW 128 STREET #216	Title Name	STD ALGECIRAS, DIANA 13501 SW 128 STREET #216	02/10/2023
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Ctor Detail : PD BALKIN, RALPH 13501 SW 128 STREET #216	Title Name Address	STD ALGECIRAS, DIANA 13501 SW 128 STREET #216	02/10/2023
SIGNATURE Officer/Direc Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : PD BALKIN, RALPH 13501 SW 128 STREET #216 MIAMI FL 33186-5863	Title Name Address	STD ALGECIRAS, DIANA 13501 SW 128 STREET #216	02/10/2023
SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title	E SUE BUNETTA Electronic Signature of Registered Agent Ctor Detail : PD BALKIN, RALPH 13501 SW 128 STREET #216 MIAMI FL 33186-5863 D	Title Name Address	STD ALGECIRAS, DIANA 13501 SW 128 STREET #216	02/10/2023

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.

SIGNATU	JRE: RAL	PH BAL	KIN
0.0.0.0			

Electronic Signature of Signing Officer/Director Detail

PD

FILED Feb 10, 2023 **Secretary of State** 7099348301CC

**Current Principal Place of Business:** 

**DOCUMENT# 742265** 

INC.

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: DEVON-AIRE VILLAS HOMEOWNERS ASSOCIATION NO. 2,