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.

PRESIDENT

SIGNATURE: CIROCCO, VIRGINIA

I

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0500003107

Entity Name: ARTECITY PARK MASTER ASSOCIATION, INC.

Current Principal Place of Business:

435 21 STREET MANAGEMENT OFFICE MIAMI BEACH, FL 33139

Current Mailing Address:

435 21 STREET MIAMI BEACH, FL 33139 US

FEI Number: 26-1161169

Name and Address of Current Registered Agent:

GOLDSTEIN , JONATHAN 251 NW 23RD STREET MIAMI, FL 33127 US

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	E: JONATHAN GOLDSTEIN			04/06/2023	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	PRESIDENT	Title	VP		
Name	CIROCCO, VIRGINIA	Name	ARIYANAYAKAM, RAMESH		
Address	435 21ST STREET SUITE #2	Address	435 21ST STREET SUITE #2		
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139		
Title	SECRETARY	Title	DIRECTOR		
Name	GRAHAM, THOMAS	Name	NATHANIAL, PETER		
Address	435 21ST STREET SUITE #2	Address	435 21ST STREET SUITE #2		
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139		
Title	TREASURER				
Name	SENEQUIER, HERVE				
Address	435 21 STREET MANAGEMENT OFFICE				
City-State-Zip:	MIAMI BEACH FL 33139				

Certificate of Status Desired: No

FILED Apr 06, 2023 Secretary of State 3577962052CC

Date

04/06/2023