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: ADIANEZ MISIGOY

City-State-Zip: MIAMI FL 33125

Electronic Signature of Signing Officer/Director Detail

Entity Name: THE ENCLAVE AT BLACK POINT MARINA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1430 NW 15 AVE MIAMI, FL 33125

Current Mailing Address:

1430 NW 15 AVE MIAMI, FL 33125 US

FEI Number: 27-2272948

Name and Address of Current Registered Agent:

SIGNATURE: ERIC GLAZER, PRESIDENT

GLAZER AND ASSOCIATES, P.A. GLAZER AND ASSOCIATES, P.A. 3113 STIRLING ROAD SUITE 201 FORT LAUDERDALE, FL 33312 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.

	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRESIDENT	Title	VP	
Name	MISIGOY, ADIANEZ	Name	SYLVESTER, LECALDO	
Address	1430 NW 15 AVE	Address	1430 NW 15 AVE	
City-State-Zip:	MIAMI FL 33125	City-State-Zip:	MIAMI FL 33125	
Title	DIRECTOR	Title	DIRECTOR	
Name	RODRIGUEZ, MARCELA	Name	CROCAMO, ABRAHAM	
Address	1430 NW 15 AVE	Address	1430 NW 15 AVE	
City-State-Zip:	MIAMI FL 33125	City-State-Zip:	MIAMI FL 33125	
Title	DIRECTOR			
Name	SINGH, NAVINDRA			
Address	1430 NW 15 AVE			

FILED Mar 17, 2017 Secretary of State CC6006996608

03/17/2017

Certificate of Status Desired: No

03/17/2017

Date