# 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.

Ρ

#### SIGNATURE: JUAN M. CUELLAR

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA	NOT FOR PROFIT CO	RPORATION ANNUAL REPORT

DOCUMENT# N06000012641

Entity Name: SAN LORENZO CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

655 WEST FLAGLER ST. 207 MIAMI, FL 33130

## **Current Mailing Address:**

655 WEST FLAGLER ST. 207 MIAMI, FL 33130

#### FEI Number: 20-5811136

#### Name and Address of Current Registered Agent:

EUROPEAN AMERICAN PROPERTY SERVICES,LLC 655 WEST FLAGLER ST. SUITE 207 MIAMI, FL 33130 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:

Electronic Signature of Registered Agent

#### Officer/Director Detail :

Title	DPS	Title	DV	
Name	CUELLAR, JUAN M.	Name	GOMEZ, BENNY	
Address	219 NW 12 AVENUE, UNIT C-1	Address	19303 SW 60TH CT	
City-State-Zip:	MIAMI FL 33128	City-State-Zip:	PEMBROKE PINES FL 33332	
Title	DT			
Name	VILLAMIZAR, ALEJANDRO			
Address	444 BRICKELL AVE STE 210			
City-State-Zip:	MIAMI FL 33131			

Certificate of Status Desired: No

FILED Apr 18, 2015 Secretary of State CC1854523434

> 04/18/2015 Date

Date