### 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. 04/09/2016

SIGNATURE: ZULLY RUIZ

Electronic Signature of Signing Officer/Director Detail

# FEI Number: 20-8421725

Name and Address of Current Registered Agent:

RUIZ, ZULLY 8886 SW 6 ST MIAMI, FL 33174 US

8886 SW 6 ST

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:

#### **Officer/Director Detail :**

Title	PD	Title	VD
Name	RUIZ, ZULLY	Name	GARCIA, ALINA
Address	8886 SW 6 ST	Address	8886 SW 6 ST
City-State-Zip:	MIAMI FL 33174	City-State-Zip:	MIAMI FL 33174

Electronic Signature of Registered Agent

MANAGING MEMBER

Date

## FILED Apr 09, 2016 Secretary of State CC8512615306

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000012786

## Entity Name: THE EDGES AT 4TH ST. CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** 

8886 SW 6 ST MIAMI, FL 33174

**Current Mailing Address:** 

MIAMI, FL 33174 US

Certificate of Status Desired: No

Date