Entity Name: AVENTURA ISLES MASTER HOMEOWNERS' ASSOCIATION, INC.	Secretary 1065690
Current Principal Place of Business:	
605 NE 193 STREET	
MIAMI, FL 33179	
Current Mailing Address:	
C/O KWPMC	

8200 NW 33RD STREET, SUITE 300 MIAMI, FL 33122 US

FEI Number: 46-2777785

Name and Address of Current Registered Agent:

LEVINE, SCOTT ESQ. 2149 NORTH COMMERCE PARKWAY WESTON, FL 33326 US Certificate of Status Desired: No

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.

		5 5	U	
SIGNATURE	SCOTT LEVINE			06/10/2020
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PD	Title	VPD	
Name	GORDON, DEREK	Name	BERRY, NAOMI	
Address	605 NE 193 ST	Address	605 NE 193 ST	
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	MIAMI FL 33179	
Title	SD	Title	TD	
Name	FURMANSKI, MARC	Name	HINESTROSA, JESSICA	
Address	605 NE 193 ST	Address	605 NE 193 ST	
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	MIAMI FL 33179	
Title	DIRECTOR			
Name	KEITH, LITMAN ESQ.			
Address	605 NE 193 STREET			
City-State-Zip:	MIAMI FL 33179			

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.

SIGNATURE: DEREK GORDON

PRESIDENT

06/10/2020

Electronic Signature of Signing Officer/Director Detail

FILED Jun 10, 2020 Secretary of State 1065690203CC

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000010967