KEY WEST, FL	33040			
Current Mai	ling Address:			
317 WHITEH KEY WEST,	IEAD STREET FL 33040			
FEI Number: NOT APPLICABLE			Certificate of Status Desired: Yes	
Name and Address of Current Registered Agent:				
CINTRON, ROE 317 WHITEHEA KEY WEST, FL	D STREET			
The above named	l entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flor	ida.
	l entity submits this statement for the purpose of changing its regis ROBERT CINTRON, JR.	tered office or regis	tered agent, or both, in the State of Flon	<sup>ida.</sup> 10/24/2016
		tered office or regis	tered agent, or both, in the State of Flor	
	Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flon	10/24/2016
SIGNATURE	Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flor	10/24/2016
SIGNATURE	ROBERT CINTRON, JR.     Electronic Signature of Registered Agent     ctor Detail :			10/24/2016
SIGNATURE Officer/Direc Title	Electronic Signature of Registered Agent Ctor Detail : P	Title	VP	10/24/2016
SIGNATURE Officer/Direc Title Name	Electronic Signature of Registered Agent Ctor Detail : P MURPHY, JOHN C 48 PARK DRIVE	Title Name	VP CISNEROS, EDUARDO A 58 LAKE DRIVE	10/24/2016
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P MURPHY, JOHN C 48 PARK DRIVE	Title Name Address	VP CISNEROS, EDUARDO A 58 LAKE DRIVE	10/24/2016
SIGNATURE Officer/Direc Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : P MURPHY, JOHN C 48 PARK DRIVE SUMMERLAND KEY FL 33042	Title Name Address	VP CISNEROS, EDUARDO A 58 LAKE DRIVE	10/24/2016
SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : P MURPHY, JOHN C 48 PARK DRIVE SUMMERLAND KEY FL 33042 SEC	Title Name Address	VP CISNEROS, EDUARDO A 58 LAKE DRIVE	10/24/2016

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: MURPHY, JOHN C

City-State-Zip: SUMMERLAND KEY FL 33042

Electronic Signature of Signing Officer/Director Detail

OFFICER

10/24/2016 Date

## 2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

Entity Name: SUMMERLAND KEY COVE HOMEOWNERS' ASSOCIATION, INCORPORATED

**Current Principal Place of Business:** 

317 WHITEHEAD STREET KEV WEST EL 33040

DOCUMENT# N15000004651

FILED Oct 24, 2016 Secretary of State CR5312010508