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: KAREN WELKS

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N2000000516

Entity Name: QUATTRO AT NAPLES SQUARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3066 TAMIAMI TRAIL NORTH, STE., 201 NAPLES, FL 34103

Current Mailing Address:

3066 TAMIAMI TRAIL NORTH, STE., 201 NAPLES, FL 34103

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

WELKS, KAREN E 3066 TAMIAMI TRAIL NORTH, STE., 201 NAPLES, FL 34103 US FILED Mar 12, 2021 Secretary of State 5155823732CC

Date

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.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PD	Title		VPD	
Name	SOLOMON, ANTHONY	Name	е	ODONNELL, JAMES VP	
Address	3066 TAMIAMI TRAIL NORTH, STE., 201	Addre	ess	3066 TAMIAMI TRAIL NORTH, STE., 201	
City-State-Zip:	NAPLES FL 34103	City-S	State-Zip:	NAPLES FL 34103	
Title	STD				
Name	WELKS, KAREN E				
Address	3066 TAMIAMI TRAIL NORTH, STE., 201				
City-State-Zip:	NAPLES FL 34103				

Date

REGISTERED AGENT

03/12/2021