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: DEVIN OLIVER

Electronic Signature of Signing Officer/Director Detail

:	SIEGFRIED RIVE 201 ALHAMBRA (ELEVENTH FLOC CORAL GABLES,	R R						
	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: MIRTA GUILLOT				04/				
		Electronic Signature of Re	egistered Agent					
	Officer/Direct	or Detail :						
	Title F	RESIDENT		Title	VP, TREASURER			

FEI Number: 87-4221469

Name and Address of Current Registered Agent:

DORAL, FL 33166 US

OLIVER, DEVIN

DORAL FL 33166

ACOSTA, DYLAN

DORAL FL 33166

8200 NW 41ST STREET

SUITE. 200

SECRETARY

SUITE. 200

8200 NW 41ST STREET

Name

Title

Name

Address

Address

City-State-Zip:

City-State-Zip:

2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N2000007744

Entity Name: PARADISE ONE NARANJA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8200 NW 41ST ST SUITE 200 DORAL, FL 33166

Current Mailing Address:

8200 NW 41ST ST SUITE 200

)24 Date

04/11/2024 Date

FILED Apr 11, 2024 Secretary of State 7101054242CC

Certificate of Status Desired: No

Title VP, TREASURER Name WALLACE, MALAREE Address 8200 NW 41ST STREET SUITE. 200 City-State-Zip: DORAL FL 33166

PRESIDENT	04/11/202