16485 COLLINS	BEACH, FL 33160			
Current Mai	ling Address:			
	INS AVENUE ES BEACH, FL 33160 US			
FEI Number: 65-0135249			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
SUITE 101	R, PLLC ACH LAKES BLVD. EACH, FL 33401 US			
The above named	l entity submits this statement for the purpose of changing its reg	stered office or regis	tered agent, or both, in the State of Floric	la.
SIGNATURE				
SIGNATURE	ROBERT B. BURR			01/23/2023
SIGNATURE	Electronic Signature of Registered Agent			01/23/2023 Date
Officer/Dire	Electronic Signature of Registered Agent			
	Electronic Signature of Registered Agent	Title	TREASURER	
Officer/Dire	Electronic Signature of Registered Agent	Title Name		
Officer/Dire	Electronic Signature of Registered Agent ctor Detail : DIRECTOR HIRSCHKORN, LEONA 16485 COLLINS AVE.		TREASURER	
Officer/Dire Title Name	Electronic Signature of Registered Agent ctor Detail : DIRECTOR HIRSCHKORN, LEONA 16485 COLLINS AVE. #1236	Name	TREASURER VILLAR, MARIO 16485 COLLINS AVE., #2234	Date
Officer/Dire Title Name Address	Electronic Signature of Registered Agent ctor Detail : DIRECTOR HIRSCHKORN, LEONA 16485 COLLINS AVE. #1236	Name Address	TREASURER VILLAR, MARIO 16485 COLLINS AVE., #2234	Date
Officer/Direc Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : DIRECTOR HIRSCHKORN, LEONA 16485 COLLINS AVE. #1236 N. MIAMI BEACH FL	Name Address	TREASURER VILLAR, MARIO 16485 COLLINS AVE., #2234	Date
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : DIRECTOR HIRSCHKORN, LEONA 16485 COLLINS AVE. #1236 N. MIAMI BEACH FL PRESIDENT	Name Address	TREASURER VILLAR, MARIO 16485 COLLINS AVE., #2234	Date

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: LEONA HIRSCHKORN

Electronic Signature of Signing Officer/Director Detail

DIRECTOR

01/23/2023 Date

FILED Jan 23, 2023 Secretary of State 4107915807CC

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33475

Entity Name: OCEANIA III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: