| Current Print<br>160 SE 29 ST   | a: 2900 ASSOCIATION, INC.<br>ncipal Place of Business:<br>RDALE, FL 33316   |                          | 3279001                                     | 502CC              |
|---|---|--------------------------|---|--------------------|
| Current Ma  | iling Address:  |                          |   |                    |
| 160 SE 29 S<br>FORT LAUE  | ST<br>DERDALE, FL 33316 US  |                          |   |                    |
| FEI Number: 65-0978129  |   |                          | Certificate of Status Desired: No           |                    |
| Name and A  | Address of Current Registered Agent:  |                          |   |                    |
| HAWTHORNE,<br>180 SE 29TH S<br>FORT LAUDEF  |   |                          |   |                    |
|   |   |                          |   |                    |
| The above name  | d entity submits this statement for the purpose of changing its regi  | stered office or regis   | tered agent, or both, in the State of Flori | da.                |
|   | d entity submits this statement for the purpose of changing its regis<br>E: JEFF HAWTHORNE  | stered office or regis   | tered agent, or both, in the State of Flori | ida.<br>04/05/2023 |
|   |   | stered office or regis   | tered agent, or both, in the State of Flori |                    |
| SIGNATURI   | E: JEFF HAWTHORNE   | stered office or regis   | tered agent, or both, in the State of Flori | 04/05/2023         |
| SIGNATURI   | E: JEFF HAWTHORNE<br>Electronic Signature of Registered Agent   | stered office or regis   | tered agent, or both, in the State of Flori | 04/05/2023         |
| SIGNATURI<br>Officer/Dire   | E: JEFF HAWTHORNE<br>Electronic Signature of Registered Agent<br>ctor Detail :  |                          |   | 04/05/2023         |
| SIGNATURI<br>Officer/Dire   | E: JEFF HAWTHORNE<br>Electronic Signature of Registered Agent<br>ctor Detail :  | Title                    | VP  | 04/05/2023         |
| SIGNATURI<br>Officer/Dire<br>Title<br>Name<br>Address                             | E: JEFF HAWTHORNE<br>Electronic Signature of Registered Agent<br>ctor Detail :<br>P<br>HAWTHORNE, JEFF  | Title<br>Name            | VP<br>HAWTHORNE, JEFF<br>100 SE 29TH STREET | 04/05/2023         |
| SIGNATURI<br>Officer/Dire<br>Title<br>Name<br>Address                             | E: JEFF HAWTHORNE<br>Electronic Signature of Registered Agent<br>Ctor Detail :<br>P<br>HAWTHORNE, JEFF<br>180 SE 29 ST                                  | Title<br>Name<br>Address | VP<br>HAWTHORNE, JEFF<br>100 SE 29TH STREET | 04/05/2023         |
| SIGNATURI<br>Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:          | E: JEFF HAWTHORNE<br>Electronic Signature of Registered Agent<br>Ctor Detail :<br>P<br>HAWTHORNE, JEFF<br>180 SE 29 ST<br>FORT LAUDERDALE FL 33316      | Title<br>Name<br>Address | VP<br>HAWTHORNE, JEFF<br>100 SE 29TH STREET | 04/05/2023         |
| SIGNATURI<br>Officer/Dire<br>Title<br>Name<br>Address<br>City-State-Zip:<br>Title | E: JEFF HAWTHORNE<br>Electronic Signature of Registered Agent<br>Ctor Detail :<br>P<br>HAWTHORNE, JEFF<br>180 SE 29 ST<br>FORT LAUDERDALE FL 33316<br>S | Title<br>Name<br>Address | VP<br>HAWTHORNE, JEFF<br>100 SE 29TH STREET | 04/05/2023         |

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: KEITH PARKER

TREASURER

04/05/2023

Electronic Signature of Signing Officer/Director Detail

## DOCUMENT# N98000004476

Entity Name: 2900 ASSOCIATION, INC.

FILED Apr 05, 2023 Secretary of State 3279001502CC