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.

PD

SIGNATURE: ANDREW MATUS

Electronic Signature of Signing Officer/Director Detail

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005487

Entity Name: GROVE AT ALLAMANDA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3059 ALLAMANDA ST MIAMI, FL 33133

Current Mailing Address:

3059 ALLAMANDA ST MIAMI. FL 33133

FEI Number: 65-1082869

Name and Address of Current Registered Agent:

MATUS, ANDREW 3059 ALLAMANDA ST MIAMI, FL 33133 US

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	TD
Name	MATUS, ANDREW	Name	ZIADIE, BRIDGET
Address	3059 ALLAMANDA ST	Address	3057 ALLAMANDA ST
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133

Certificate of Status Desired: No

02/18/2018

FILED Feb 18, 2018 Secretary of State CC8222053831

Date

Date