| 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: JAMEIDA LOPEZ

Electronic Signature of Signing Officer/Director Detail

Entity Name: POTOMAC PLACE CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

12895 SW 132ND STREET SUITE 103 MIAMI, FL 33186

## **Current Mailing Address:**

POB 770010 MIAMI, FL 33177 US

## FEI Number: 65-0998586

## Name and Address of Current Registered Agent:

FLORIDA ADVANCED PROPERTIES, INC 12895 SW 132ND STREET SUITE 103 MIAMI, FL 33186 US 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                 | E: R.SUCO                                |                 |                | 04/19/2018 |  |
|---------------------------|--|-----------------|----------------|------------|--|
|                           | Electronic Signature of Registered Agent |                 |                | Date       |  |
| Officer/Director Detail : |  |                 |                |            |  |
| Title                     | PRESIDENT                                | Title           | VP, TREASURER  |            |  |
| Name                      | LOPEZ, JAMEIDA                           | Name            | SUCO, ROBERT   |            |  |
| Address                   | POB 770010                               | Address         | POB 770010     |            |  |
| City-State-Zip:           | MIAMI FL 33177                           | City-State-Zip: | MIAMI FL 33177 |            |  |
| Title                     | SECRETARY                                |                 |                |            |  |
| Name                      | FLORES EXPOSITO, SIGLINDA                |                 |                |            |  |
| Address                   | POB 770010                               |                 |                |            |  |
| City-State-Zip:           | MIAMI FL 33177                           |                 |                |            |  |

EIDA LOPEZ

PRESIDENT

04/19/2018

FILED Apr 19, 2018 Secretary of State CC6795508751

Date