	ncipal Place of Business: ROWARD BLVD, SUITE 300 FL 33324		720170374400
Current Mai	ling Address:		
	BROWARD BLVD, SUITE 300 N, FL 33324 US		
FEI Number	: 26-4057426		Certificate of Status Desired: No
Name and A	Address of Current Registered Agent:		
100 N.E. THIRE SUITE 1000	CHAEL P ESQ. D AVENUE RDALE, FL 33301 US		
The above name	d entity submits this statement for the purpose of changing	uits registered office or regis	tered agent, or both, in the State of Florida
			tered agent, or boar, in the otate of rionda.
	E: MICHAEL P. HAMAWAY, ESQ.		01/20/2020
	-		
	E: MICHAEL P. HAMAWAY, ESQ. Electronic Signature of Registered Agent		01/20/2020
SIGNATURE	E: MICHAEL P. HAMAWAY, ESQ. Electronic Signature of Registered Agent	Title	01/20/2020
SIGNATURE Officer/Dire	E: MICHAEL P. HAMAWAY, ESQ. Electronic Signature of Registered Agent		01/20/2020 Date
SIGNATURE Officer/Dire	E: MICHAEL P. HAMAWAY, ESQ. Electronic Signature of Registered Agent Ctor Detail :	Title	01/20/2020 Date
SIGNATURE Officer/Dire Title Name	EIECTRONIC SIGNATURE OF REGISTERED AGENT CTOR Detail : D KAMELHAIR, STEVEN R 8181 WEST BROWARD BLVD, SUITE 300	Title Name	01/20/2020 Date D NEMEROFSKY, STEPHEN L 8181 WEST BROWARD BLVD, SUITE 300
SIGNATURE Officer/Dire Title Name Address	EIECTRONIC SIGNATURE OF REGISTERED AGENT CTOR Detail : D KAMELHAIR, STEVEN R 8181 WEST BROWARD BLVD, SUITE 300	Title Name Address	01/20/2020 Date D NEMEROFSKY, STEPHEN L 8181 WEST BROWARD BLVD, SUITE 300
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	EINCHAEL P. HAMAWAY, ESQ. Electronic Signature of Registered Agent Ctor Detail : D KAMELHAIR, STEVEN R 8181 WEST BROWARD BLVD, SUITE 300 PLANTATION FL 33324	Title Name Address	01/20/2020 Date D NEMEROFSKY, STEPHEN L 8181 WEST BROWARD BLVD, SUITE 300
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	EINCHAEL P. HAMAWAY, ESQ. Electronic Signature of Registered Agent Ctor Detail : D KAMELHAIR, STEVEN R 8181 WEST BROWARD BLVD, SUITE 300 PLANTATION FL 33324 D	Title Name Address	01/20/2020 Date D NEMEROFSKY, STEPHEN L 8181 WEST BROWARD BLVD, SUITE 300

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN R KAMELHAIR

Electronic Signature of Signing Officer/Director Detail

01/20/2020

Date

## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0900002445

Entity Name: OPH NORTH PALM, INC.

**FILED** Jan 20, 2020 **Secretary of State** 7281765744CC