	S AVE 31ST FLOOR BEACH, FL 33160			
Current Mai	ling Address:			
	INS AVE 31ST FLOOR ES BEACH, FL 33160			
FEI Number: 46-3864690			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
STAMM, WARREN J 18001 COLLINS AVE 31ST FLOOR SUNNY ISLES BEACH, FL 33160 US				
The above name	l entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Florida	
	entity submits this statement for the purpose of changing its regis WARREN J. STAMM, ESQ.	stered office or regis		3/14/2014
		stered office or regis		
	E: WARREN J. STAMM, ESQ. Electronic Signature of Registered Agent	stered office or regis		3/14/2014
SIGNATURE	E: WARREN J. STAMM, ESQ. Electronic Signature of Registered Agent	stered office or regis		3/14/2014
SIGNATURE Officer/Dire	E: WARREN J. STAMM, ESQ. Electronic Signature of Registered Agent		0	3/14/2014
SIGNATURE Officer/Dire	E: WARREN J. STAMM, ESQ. Electronic Signature of Registered Agent Ctor Detail : PD	Title	VD	3/14/2014 Date
SIGNATURE Officer/Dire Title Name Address	E: WARREN J. STAMM, ESQ. Electronic Signature of Registered Agent Ctor Detail : PD DEZER, GIL	Title Name Address	VD GURWITZ, ESTEE	3/14/2014 Date
SIGNATURE Officer/Dire Title Name Address	E: WARREN J. STAMM, ESQ. Electronic Signature of Registered Agent Ctor Detail : PD DEZER, GIL 18001 COLLINS AVE 31ST FLOOR	Title Name Address	VD GURWITZ, ESTEE 18001 COLLINS AVE 31ST FLOOR	3/14/2014 Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	E: WARREN J. STAMM, ESQ. Electronic Signature of Registered Agent Ctor Detail : PD DEZER, GIL 18001 COLLINS AVE 31ST FLOOR SUNNY ISLES BEACH FL 33160	Title Name Address	VD GURWITZ, ESTEE 18001 COLLINS AVE 31ST FLOOR	3/14/2014 Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	E: WARREN J. STAMM, ESQ. Electronic Signature of Registered Agent Ctor Detail : PD DEZER, GIL 18001 COLLINS AVE 31ST FLOOR SUNNY ISLES BEACH FL 33160 STD	Title Name Address	VD GURWITZ, ESTEE 18001 COLLINS AVE 31ST FLOOR	3/14/2014 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GIL DEZER

PRESIDENT

03/14/2014

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P12000098185

Entity Name: 18555 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

(

FILED Mar 14, 2014 **Secretary of State** CC0610858204

Date