## 2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N07000011553

FILED Jul 16, 2013 Secretary of State

Entity Name: PARK SQUARE AT DORAL RESIDENTIAL MASTER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5835 BLUE LAGOON DRIVE 3470 NW 82ND AVENUE 4TH FLOOR SUITE 988

MIAMI, FL 33126 DORAL, FL 33122

Current Mailing Address: New Mailing Address:

 5835 BLUE LAGOON DRIVE
 3470 NW 82ND AVENUE

 4TH FLOOR
 SUITE 988

 MIAMI, FL 33126
 DORAL, FL 33122

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SILVA, FRANK
5835 BLUE LAGOON DRIVE
4TH FLOOR
MIAMI, FL 33126 US
SILVA, FRANK
3470 NW 82ND AVENUE
SUITE 988
DORAL, FL 33122 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: FRANK SILVA 07/16/2013

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: D/P

Name: CHONG, PRISCILLA

Address: 3470 NW 82ND AVENUE, SUITE 988

City-St-Zip: DORAL, FL 33122

Title: D/S

Name: CABRERA, KIRA

Address: 3470 NW 82ND AVENUE, SUITE 988

City-St-Zip: DORAL, FL 33122

Title: D/T

Name: HERNANDEZ, ANNETTE

Address: 3470 NW 82ND AVENUE, SUITE 988

City-St-Zip: DORAL, FL 33122

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: PRISCILLA CHONG D/P 07/16/2013