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.

PRESIDENT

SIGNATURE: JOHN MACLAREN

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 726296

Entity Name: THE GABLES BATH CLUB APARTMENTS, INC.

Current Principal Place of Business:

700 CORAL WAY CORAL GABLES, FL 33134

Current Mailing Address:

700 CORAL WAY TREASURER/SECRETARY CORAL GABLES, FL 33134 US

FEI Number: 59-1567217

Name and Address of Current Registered Agent:

PARISER, BRIAN W DADELAND CENTRE 9155 SOUTH DADELAND BLVD. PENTHOUSE 1 - SUITE 1718 MIAMI, FL 33156 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	E: BRIAN W. PARISER			01/25/2023
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title Name Address	PRESIDENT, SECRETARY, TREASURER MACLAREN, JOHN 700 CORAL WAY # 05	Title	DIRECTOR	
		Name	WOLF, HARRIET MRS.	
		Address	700 CORAL WAY # 10 CORAL GABLES FL 33134	
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:		
Title	VP			
Name	URBIZU, WILLIAM			
Address	700 CORAL WAY # 09			
City-State-Zip:	CORAL GABLES FL 33134			

Certificate of Status Desired: No

01/25/2023 Date

FILED Jan 25, 2023 Secretary of State 4895247767CC