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: FERNANDO NIN

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail : Title ST/D Title VP NIN, FERNANDO Name LEYTON-BELL, BIBIANA C Name 4856 ECHO COURT Address 6424 SW 33RD ST Address City-State-Zip: MIRAMAR FL 33023 OVIEDO FL 32765 City-State-Zip: Title PRESIDENT SANCHEZ, DAMARYS Name 4601 PONCE DE LEON BLVD. STE 280

Address

CORAL GABLES FL 33146 City-State-Zip:

Entity Name: PASSAGEWAY RESIDENCE OF DADE COUNTY, INC.

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

2255 N.W. 10TH AVE MIAMI, FL 33127

DOCUMENT# 757208

Current Mailing Address:

2255 N.W. 10TH AVE MIAMI, FL 33127 US

FEI Number: 59-2088143

Name and Address of Current Registered Agent:

MENENDEZ, LILLIAN CEO 1154 N.W. 183 TERR PEMBROKE PINES, FL 33029 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:

Apr 28, 2021 Secretary of State 1807006813CC

Date

FILED

Certificate of Status Desired: Yes

ST/D

04/28/2021

Electronic Signature of Registered Agent