| 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: ELLIOTT SUTTON

Electronic Signature of Signing Officer/Director Detail

### DOCUMENT# N0200005844

#### Entity Name: M RESORT RESIDENCES CONDOMINIUM ASSOCIATION, INC.

#### **Current Principal Place of Business:**

18683 COLLINS AVE SUNNY ISLES BEACH. FL 33160

#### **Current Mailing Address:**

2881 E OAKLAND PARK BLVD **SUITE 409** FORT LAUDERDALE, FL 33306 US

## FEI Number: 20-1792762

# Name and Address of Current Registered Agent:

ROGEL, DAVID H ESQUIRE BECKER & POLIAKOFF, P.A. 121 ALHAMBRA PLAZA - 10TH FLOOR CORAL GABLES, FL 33134 US

Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

### **Officer/Director Detail :**

| Title           | PD                         | Title           | VD                         |
|-----------------|----------------------------|-----------------|----------------------------|
| Name            | SUTTON, ELLIOTT            | Name            | LEVITT, PAUL               |
| Address         | 18683 COLLINS AVENUE       | Address         | 18683 COLLINS AVE          |
| City-State-Zip: | SUNNY ISLES BEACH FL 33160 | City-State-Zip: | SUNNY ISLES BEACH FL 33160 |
| Title           | SD                         | Title           | TD                         |
| THE             | 65                         |                 |                            |
| Name            | GAVRA, NIR                 | Name            | PINZON, MIGUEL             |
| Address         | 18683 COLLINS AVE          | Address         | 18683 COLLINS AVE          |
| City-State-Zip: | SUNNY ISLES BEACH FL 33160 | City-State-Zip: | SUNNY ISLES BEACH FL 33160 |
|                 |                            |                 |                            |
| Title           | D                          |                 |                            |
| Name            | RAKOVER, ALEJANDRO         |                 |                            |
| Address         | 18683 COLLINS AVE          |                 |                            |
| City-State-Zip: | SUNNY ISLES BEACH FL 33160 |                 |                            |

02/05/2014

FILED Feb 05, 2014 Secretary of State CC3004825610

Date