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: ANMIEL GONZALEZ

Electronic Signature of Signing Officer/Director Detail

# Entity Name: RIVER POINTE CONDOMINIUM ASSOCIATION, INC. Current Principal Place of Business:

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

2400 NW 22 CT MIAMI, FL 33142

# **Current Mailing Address:**

DOCUMENT# N06000001563

PO BOX 452756 MIAMI, FL 33245 US

# FEI Number: 20-8222558

Name and Address of Current Registered Agent:

DOCE, JOSE 1800 SW 1 ST SUITE 201 MIAMI, FL 33135 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:

Electronic Signature of Registered Agent

### Officer/Director Detail :

TitleDPNameGONZALEZ, ANMIELAddress2400 NW 22 CTCity-State-Zip:MIAMI FL 33142

FILED Jan 15, 2018 Secretary of State CC0635899098

Certificate of Status Desired: No

Date

01/15/2018 Date