is Desired: No	
rida.	
02/19/2020	
Date	

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: BENJAMIN ALICEA

HOA PRESIDENT

02/19/2020

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0800009417

Entity Name: CARLEY ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3006 CARLEY ESTATES CT

FILED Feb 19, 2020 **Secretary of State** 5895637839CC

Date