Current Pri	ncipal Place of Business:			
	ENTER ROAD, SUITE 350			
BOCA RATON,	, FL 33486			
Current Mai	iling Address:			
5355 TOWN	I CENTER ROAD, SUITE 350			
	DN, FL 33486			
FEI Number: NOT APPLICABLE			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
	TION SYSTEM PINE ISLAND ROAD			
PLANTATION,	FL 33324 US			
,	FL 33324 US d entity submits this statement for the purpose of changing its reg	gistered office or regis	tered agent, or both, in the State of Florida.	
The above name		, u		03/2024
The above name	d entity submits this statement for the purpose of changing its reg	, u		03/2024 Date
The above name	d entity submits this statement for the purpose of changing its reg E: JOHY FLYNN, ASSISTANT SECRETARY	, u		
The above name	d entity submits this statement for the purpose of changing its reg JOHY FLYNN, ASSISTANT SECRETARY Electronic Signature of Registered Agent	, u		
The above name SIGNATURE Officer/Dire	d entity submits this statement for the purpose of changing its reg E: JOHY FLYNN, ASSISTANT SECRETARY Electronic Signature of Registered Agent ctor Detail :		07/	
The above name SIGNATURE Officer/Dire Title	d entity submits this statement for the purpose of changing its reg JOHY FLYNN, ASSISTANT SECRETARY Electronic Signature of Registered Agent ctor Detail : P/T	Title	VP/S	
The above name SIGNATURE Officer/Dire Title Name	d entity submits this statement for the purpose of changing its reg E: JOHY FLYNN, ASSISTANT SECRETARY Electronic Signature of Registered Agent ctor Detail : P/T DELUCA, MARC 5355 TOWN CENTER ROAD, SUITE 350	Title Name	VP/S ALDRIDGE, ALLEN 5355 TOWN CENTER ROAD, SUITE 350	

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.

VP/S

SIGNATURE: ALLEN ALDRIDGE

Electronic Signature of Signing Officer/Director Detail

07/03/2024

Date

2024 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N2000001742

Entity Name: ONE TOWN CENTER LAND CONDOMINIUM ASSOCIATION, INC.

Jul 03, 2024 **Secretary of State** 7207195246CR

FILED