DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION DIVISION OF FLORIDA CONDOMINIUMS, TIMESHARES AND MOBILE HOMES

Enclave at Naples Condominium Association Candidate Certification Form*

I,	(print name of board member)	, certify that I	have read the association's declaration of
condomir policies to	nium, articles of incorporation, bylaws o the best of my ability and that I will f	, and current written polication and current written polication and current with the curren	icies and will work to uphold such documents and duciary responsibility to the association's members
	Enclave at Naples	(Print name of associa	Association, Inc.
Signed: _	(signature of candidate)		
Date:	11-22-2024		

^{*}Required by section 718.112(2)(d)4.b., of Chapter 718, Florida Statutes