N080000189

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COVER LETTER

TO: Amendment Section
Division of Corporations

Treasure Coast NAME OF CORPORATION:	Commerce Center C	ondominium Association, Inc.		
N0800001789				
DOCUMENT NUMBER: 110000001				
The enclosed Articles of Amendment and fee are sub-	mitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
Todd Jackson				
	(Name of Contact Person	1)		
Capital Realty Advisors,	Inc.			
	(Firm/ Company)			
600 Sandtree Drive, Suit	te 109			
	(Address)			
Dolm Dooch Condons C	1 00400			
Palm Beach Gardens, F				
	(City/ State and Zip Code	e)		
coconnell@capita	alrealtyadvis	ors.com		
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please	call:			
Todd Jackson	_{at (} 561	、624-5888		
(Name of Contact Person)		ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made pa	yable to the Florida Depa	ertment of State:		
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301		

Articles of Amendment Articles of Incorporation

Treasure Coast Commerce Center Condominium Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N08000001789 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	Y Mik	n <u>Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	Stephen F Holste	900 N. Rock Hill Road
Add			St. Louis, MO 63119
Remove			
2) Change	S,T	Tracy Bell	900 N. Rock Hill Road
Add			St. Louis, MO 63119
Remove 3) Change	VP,S	Jeffrey Cook	900 N. Rock Hill Road
Add			St. Louis, MO 63119
Remove			
4) Change	D	Robert McKee	7744 Jack James Dr.
X Add			Stuart, FL 34997
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)	
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The date of each amendment date this document was signed	***	, if other than the
Effective date if applicable:	7/14/2014	
<u></u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
Dated	7/22/14	
Signature	7/	
(By the have n	chairman or vice chairman of the board, president or other officer-if directors ot been selected, by an incorporator — if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	
<i>5</i> 76	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	