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TO: Amendment Section **Division of Corporations**

Normandy K Association, Inc. NAME OF CORPORATION:						
DOCUMENT NUMBER:		<u> </u>	<i>,</i>			
The enclosed Articles of Amendment and fee are su	ubmitted for filing.					
Please return all correspondence concerning this ma	atter to the following:					
Bonnie Platti						
	(Name of Contact	Person)				
Condominium Concepts Management						
	(Firm/ Compa	iny)				
301 Yamato Road Suite 1240						
	(Address)					
Boca Raton, FL 33431						
	(City/ State and Zi	p Code)			_	
bplatti@condominiumconcepts.com						
E-mail address: (to be us	ed for future annual r	eport noti	fication)	-	
For further information concerning this matter, please	se call:					
Bonnie Platti	,	561 at		869-4136		
(Name of Contact Person		(Area (Code)	(Daytime Telephone Number)	_	
Enclosed is a check for the following amount made	payable to the Florida	a Departm	ent of S	state:		
■ \$35 Filing Fee Securificate of Status		is is	Certifi Certifi	Filing Fee cate of Status ed Copy is conal Copy is sed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	A D C 2	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment to Articles of Incorporation of

of Normandy K Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 745993 (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: Susan Dubow Name of New Registered Agent: 513 Normandy K (Florida street address) New Registered Office Address: Delray Beach 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.

Page 1 of 4

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		·
Type of Action (Check One)	Title	<u>Name</u>	:	Address
1) Change				
Add			_	
Remove			_	
2) Change		.		
Add			_	
Remove				
3) Change		_		
Add			_	
Remove				
4) Change				
Add				
Remove			_	
5)Change				
Add	***************************************			
			_	
Remove			_	
6) Change		_		
Add				
Remove				

attach additiona	adding addition if necessity and additional states and additional	essary). (E	Be specific)					
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The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
05/01/17	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing re- locument's effective date on the Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the members and the number of votes ca was/were sufficient for approval.	st for the amendment(s)
There are no members or members entitled to vote on the amendment(s). The an adopted by the board of directors.	nendment(s) was/were
05/01/17 Dated	
Signature X Lusan B DuBou	<i>U</i>
(By the effairman or vice chairman of the board, president or or have not been selected, by an incorporator — if in the hands of other court appointed fiduciary by that fiduciary)	
Susan Dubow	
(Typed or printed name of person s	igning)
President	
(Title of person signing)