Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NAJMY THOMPSON, P.L.

Account Number : I2009000014 3 Phone : (941)907-3999

Fax Number : (941)907-8999

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Inajmy a najmy thompson. com

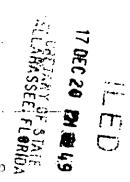
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AMI PRIME VACATION HOMES LLC

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From:

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| AMI PRIME VACATION HOMES | | | |
|---|--|---|-----------------------------|
| (Name of the Limit | ed Liability Company as (A Florida Limited Liabilit | r now appears on our records.) y Company) | |
| The Articles of Organization for this Limited Li Florida document number L16000091434 | ability Company were | filed on May 10, 2016 | and assigned |
| This amendment is submitted to amend the follo | owing: | | |
| A. If amending name, <u>enter the new name of</u> | the limited liability o | ompany here: | |
| The new name must be distinguishable and contain the w | ords "Limited Liability Co | mpany," the designation "LLC" or | r the abbreviation "L.L.C." |
| Enter new principal offices address, if applica | able: | | |
| (Principal office address MUST BE A STREE | T ADDRESS) | | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | 7 8 |
| | | | SS SS |
| B. If amending the registered agent and/ registered agent and/or the new registered of | or registered office fice address here: | address on our records, 9 | ー デザ 2 11 1 |
| Name of New Registered Agent: | Louis Najmy | | S IA |
| New Registered Office Address: | 1401 8th Avenue We | | 1> |
| | | Enter Florida street address | |
| | Bradenton | | da 34205 |
| | C | ~in· | Zip Code |

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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| Effective date, if other than the date of fan effective date is listed, the date must be speci. Note: If the date inserted in this block does document's effective date on the Department. | fic and cannot be prior to dat a not meet the applicable s | ie of filing of more man 90 (| _ (optional) Lays after filing.) Pursuant to 609 ents, this date will not be list | 5.0207 (3 ed as th |
| ne record specifies a delayed effect The 90th day after the record is f | ive date, but not an ïled. | effective time, at 1 | 2:01 a.m. on the earli | er of: |
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| Signatur | e of a member or authorized | representative of a membe | r | |

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