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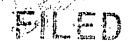
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	on: PLA	COMMERCE	CENTER	ASSOCIAMON	ليماد
DOCUMENT NUMBER:	N040000	10938			
The enclosed Articles of Am	endment and fee are sul	bmitted for filing.			
Please return all corresponde	ence concerning this mat	ter to the following:			
	SANDRA S	OLA 2.20 (Name of Contact Person			
		(Name of Contact Person	on)		
	1/A				
		(Firm/ Company)			_
	560 SW	(Address)			_
		(Address)			
	POMP ANO	BCACH (City/ State and Zip Co	A 3301		
		(City/ State and Zip Co	de)		
		RSYDS & GA		ζ	
E	-mail address: (to be use	ed for future annual repor	t notification)		
For further information conc	erning this matter, pleas	e call:			
SANDAA	SOLAZZO	at	954 61	4 9756 rtime Telephone Number)	
	(Name of Contact Perso	n) (A	Area Code) (Day	time Telephone Number)	
Enclosed is a check for the f	ollowing amount made p	payable to the Florida Dep	partment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	≥ □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filin Certificate o Certified Co (Additional Enclosed)	f Status Py	
Mailing A			t Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



orporation as currently filed with the Florida Dept. of State (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: New Registered Office Address: 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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	Name	Address
1) Change Add	<u>lsr</u>	TREMBIAY GUY	BOOD CLUBHOUSE DR#311
Remove 2) Change Add	PST	HORRIS, ED	1711 SW 7 Ave Bryano Bl 71
Remove 3) Change Add Remove	<u>VP</u>	LEIDY, BRIAN	33060 1731 3w 7 Ave prupan Bel 11 33060
4) Change Add Remove	<u>1</u>	SOLAZZO, SANDM	560 SN 6cM frompan Bel 71 33060
5) Change Add Remove			
6) Change Add Remove			
Kelliove		D 0-64	

E. If amending or adding additional Artication (attach additional sheets, if necessary).	icles, enter change(s) here:
(under dualitorial sheets, if necessary).	
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	ther than the
Effective date if applicable: December 16, 2015	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	d as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated (2/16/15)	
Signature Donblon	
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Guy INEM BLA Y (Typed or printed name of person signing)	
P S-T (Title of person signing)	