N0500003831

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TO: Amendment Section Division of Corporations

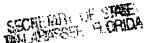
NAME OF CORPORATION	Plaza Tower Master A	Association, Inc			
DOCUMENT NUMBER:	N05000003831				
The enclosed Articles of Am					
Please return all corresponde	ence concerning this matter	r to the following:			
Steven Latham					
		(Name of Contact Pe	erson)		
Premier Property Managem	ent and Consulting, LLC				
		(Firm/ Company	·)	TOTAL STATE OF THE	
300 South Duval Street					
		(Address)			
Tallahassee, FL 32301					
		(City/ State and Zip	Code)		
slathamcps@gmail.com					
	-mail address: (to be used	tor future annual rep	ort notification	n)	
For further information cond	cerning this matter, please	call:			
Steven Latham		at	850	264-5376	
	(Name of Contact Person))	(Area Code)	(Daytime Telephone Nu	mber)
Enclosed is a check for the f	following amount made pay	yable to the Florida I	Department of	State:	
☐ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Ceni s Ceni (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)	

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street-Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of

Plaza Tower Master Association, Inc		
(Name of Corporation	as currently filed with the Flo	rida Dept. of State)
N05000003831		
(Docur	nent Number of Corporation (if l	(nown)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not F</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		. The new
name must be distinguishable and contain the word "Company" or "Co." may not he used in the nam	l "corporation" or "incorporate <u>e</u> .	d" or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>		
	Print dayle to the construction of the constru	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	
D. If amending the registered agent and/or reginew registered agent and/or the new register		, enter the name of the
-	Premier Property Management	and Consulting, LLC
Nume of New Registered Agent:	300 South Duval Street	
		lorida street address)
New Registered Office Address:		,
	Tallahassee	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing l hereby accept the appointment as registered agen		t the obligations of the position.
_	JA -	
	Signature of New Regi-	stered 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 = Trustce; 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 un Add.

Example: X Change X Remove X Add	<u>V</u> <u>M</u>	<u>hn Doe</u> ike <u>Jones</u> illy Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PD	Michael Baumann	1200 Brickell Avenue
Add			Suite 1720
X Remove			Miami, FL 33131
2) Change	TD	Russell Sykes, Jr	1200 Brickell Avenue
Add			Suite 1720
X Remove			Miami, FL 33131
3) Change	SD	Russell Sykes, Sr	1200 Brickell Avenue
Add			Suite 1720
X Remove			Miami, FL 33131
4) Change	PD	Robert Ship	111 South Wacker
X Add			Suite 3925
Remove			Chicago, IL 60606
5) Change	TD	Donita Johnson	8403 Colesville Road
X Add			13th Floor
Remove			Silver Springs, MD 20910
6) Change	SD	Herbert Kolhen	8403 Colesville Road
X Add		****	13th Floor
Remove			Silver Springs, MD 20910

famending or adding additional Arwach additional sheets, if necessary).	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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	3/11/2014	
The date of each amend	dment(s) adoption;	, if other than the
date this document was s	signed,	
	3/11/2014	
Effective date if applies		
	(no more than 90 days after amendment file date)	
	d in this block does not meet the applicable statutory filing requirements, this date will not te on the Department of State's records.	t be listed as the
Adoption of Amendme	nt(s) (CHECK ONE)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no memb adopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.	
Dated	9/28/2015 Polis + St.	
Signature		
Ì	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)	
	Robert Ship	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	