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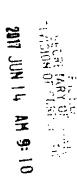
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VENTURE /	T AVENTURA MASTER ASSO	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee	re submitted for filing.	
Please return all correspondence concerning th	s matter to the following:	E B
MIGUEL A. DIAZ		3
	(Name of Contact Person)
VENTURE AT AVENTURA MASTER ASS	CIATION, INC.	
,	(Firm' Company)	
18800 NE 29TH AVE #1200		
	(Address)	
AVENTURA, FL 33180		
	(City/ State and Zip Code)
manager@ventureataventura.com		
E-mail address: (to	be used for future annual report in	olification)
For further information concerning this matter,	please call:	
MIGUEL A. DIAZ	786 atat	787-0192
(Name of Contact	Person) (Are	ra Code) - (Daytime Telephone Number)
Enclosed is a check for the following amount r	ade payable to the Florida Depar	tment of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of	Fee & \$\Baises \\$43.75 \text{ Filing Fee & Status Certified Copy (Additional copy is enclosed)}	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations		Address nent Section 1 of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	Articles of Amendment to		
	Articles of Incorporation	· ·	,,
	of		1
VENTURE AT AVENTURA MASTER ASSOCIA	FION, INC.	<u> </u>	3
(Name of Corporation a	s currently filed with the Flor	rida Dept. of State)	
NO5000007934		·	8
(Docume	nt Number of Corporation (if k	nown)	7
Pursuant to the provisions of section 617,1006, Florid imendment(s) to its Articles of Incorporation:	la Statutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following	1
A. If amending name, enter the new name of the c	orporation:		
NO .			
name must be distinguashable and contain the word "Company" or "Co." may not be used in the name.	corporation" or "incorporated	The new d" or the abbreviation "Corp." or "Inc."	
B. <u>Enter new principal office address, if applicable Principal office address MUST BE A STREET AD</u>			
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>)X</u>)		
 If amending the registered agent and/or registered new registered agent and/or the new registered 		enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(F)	lorula street address)	
		Florida	
	(Ciţv)	(Zip Code)	
New Registered Agent's Signature, if changing Re	victored Avent		
hereby accept the appointment as registered agent	Tam familiar with and accept	the obligations of the position.	
_	Signature of New Roams	tered Agent it 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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe le Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	BENYES, ILAN	2775 NE 187TH ST
			#204
Add X Remove			AVENTURA, FL 33180
2) X Change	VP & S	FUNG, WAYNE TERENCE	18800 NE 29TH AVE
Add	-		#929
Remove			AVENTURA, FL 33180
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	 		
Add			
Remove			

E. Hamending or ac	dding additional Arti sheets, if necessary).	cles, enter change	e(s) here:			
,(attach additional).	sneets, if necessary).	<i>(Ве ѕресіріє)</i>				
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	APRIL 25, 2017	
The date of each amendment(s) as	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment tile date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a was/were sufficient for approve	dopted by the members and the number of votes cast for the amendmental.	$\mathfrak{n}(s)$
☐ There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/we ors.	ie
Dated JUNE 5, 20	1	
Signature	A CONTRACTOR OF THE PARTY OF TH	
(By the chai have not be	rman or vice thairman of the board, president or other officer-if directors selected, by an incorporator - if in the hands of a receiver, trustee, of appointed fiduciary by that fiduciary)	
	MAYNE TERRICE TUNG (Typed or printed name of person signing)	_
	Vp / SECRETARY.	_
	(Title of person signing)	