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SECRETARY OF STATE

TALLAHASSEF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

VENTURE AT AVENAME OF CORPORATION:	NTURA MASTER AS	SOCIATIO	N. INC.
NO5000007934 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	itted for filing.		
Please return all correspondence concerning this matter	to the following:		
DYLAN GOUBIN			
	Name of Contact Pers	on)	
VENTURE AT AVENTURA MASTER ASSOCIATION	ON, INC.		
	(Firm/ Company)		
18800 NE 29TH AVE #1200			
	(Address)		
AVENTURA, Ft. 33180			
	City/ State and Zip Co	ode)	
manager@ventureataventura.com			
E-mail address: (to be used f	or future annual repor	t notification	1)
For further information concerning this matter, please e	all:		
DYLAN GOUBIN	at	786	787-0192
(Name of Contact Person)		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida De	partment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status	2\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		et Address ndment Section of Corpo on Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as o	urrently filed with the Flori	ida Dept. or State
N05000007934		SECRETARY OF STATE
(Document	Number of Corporation (if kn	INTALLAHASSEE, FLORIDA
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the cor	poration:	
N0		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporated	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)	<u>(ESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	·)	
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		enter the name of the
Name of New Registered Agent:		
<u> </u>	(Fle	orido street address)
		Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	tered Agent: am familiar with and accept t	the obligations of the position.
	Signature of New Registo	ored 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 <math>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.

X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>i Doe</u> e Jones y <u>Smith</u>		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) X Change	S	FUNG, WAYNE	18800 NE 29TH AVE	
Add			929	_
Remove			AVENTURA, FL 33180	
2) X Change	Р	GORINA, JUANA MERCEDES	2775 ne 187th st	
Add			402	
Remove			Aventura, FL 33180	_
3) Change				_
Add				
Remove				_
4) Change				
Add				
Remove				_
5) Change				
Add				
Remove				_
6) Change				
Add				
Remove				

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)			
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JUNE 7, 2018	
The date of each amendment(s) adoption:	, if other than the
iate this document was signed.	
ffective date if applicable:	
(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 document's effective date on the Department of State's records.	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 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 Signature Mucido Manier Preside not	
(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)	
GORINA, JUANA MERCEDES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	