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## COR AMND/RESTATE/CORRECT OR O/D RESIGN PINE CREEK SPORTING CLUB HOMEOWNERS ASSOCIATION, INC

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Corporate Piling Menu

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## Articles of Amendment to Articles of Incorporation

| <u> </u>   | owners Assoc                    |   |   |                  |
|--|---------------------------------|---|---|------------------|
| (Name of Corporation as currently filed with   | the Florida Dept. of St         | <u>ate</u> )                            |   |                  |
| N08000007029   |                                 |   | · · · · · · · · · · · · · · · · · · ·   |                  |
| (Document Number of  | Corporation (if known)          |   |   |                  |
| Pursuant to the provisions of section 617.1006, Florida<br>amendment(s) to its Articles of Incorporation:                | Statutes, this <i>Florida N</i> | lot For Profit Corporation              | adopts the follo                        | wing             |
| A. If amending name, enter the new name of the co  | rporation:                      |   |   |                  |
| name must be distinguishable and contain the word "c<br>"Company" or "Co." may not be used in the name.                  | corporation" or "incorp         | orated" or the abbreviation             |   | new<br>nc."      |
| 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 ADD                      |                                 |   | -                                       |                  |
| rruncipal office unaress <u>(NUST BE A STREET ADD</u>  | <u>RE33</u> )                   |   | رچستان<br>سورانی<br>دوانه               | <b>نب</b><br>دست |
|  |                                 |   | 7                                       |                  |
|  |                                 | <u> </u>                                | - * * * * * * * * * * * * * * * * * * * | <b>2</b> 2       |
| C. Enter new mailing address, if applicable:   |                                 |   |   |                  |
| (Mailing address MAY BE A POST OFFICE BO.  | <i>x</i>                        | · • • • • • • • • • • • • • • • • • • • |   |                  |
|  | **                              |   |   | 5 T              |
|  |                                 |   | 14                                      | 23               |
|  | <del></del>                     |   |   |                  |
| <ol> <li>If amending the registered agent and/or register<br/>new registered agent and/or the new registered.</li> </ol> | ed office address in Flo        | orida, enter the name of th             | <u>1e</u>                               |                  |
| new registered agent while or the wew (agreement)  | inite adii cos.                 |   |   |                  |
| Name of New Registered Agent:  | · <del></del>                   |   |   |                  |
| <del></del>  |                                 |   |   |                  |
| New Registered Office Address:   | (Florida street addri           | 255)                                    |   |                  |
| Terr Treggior en Office Had 655.   | •                               |   |   |                  |
|  | (City)                          | , Florida<br>(Zip Code)                 |   | <del>,,</del>    |
|  | (Cuy)                           | (Zip Code)                              |   |                  |
| New Registered Agent's Signature, if changing Regi   |                                 |   |   |                  |
| hereby accept the appointment as registered agent.   |                                 |   |   |                  |

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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.

| X Change X Remove X Add       | <u>Y</u> <u>M</u> | hn Doe<br>ike Janes<br>Illy Smith |                           |
|-------------------------------|-------------------|-----------------------------------|---------------------------|
| Type of Action<br>(Check One) | <u>Title</u>      | Name                              | Address                   |
| 1)Change                      | ST                | Jeffrey S. Budz                   | 1 N. Clematis St.         |
| Add                           |                   | •                                 | Suite 100                 |
| X Remove                      |                   |                                   | West Palm Beach, FL 33401 |
| 2) Change                     | ST                | John Reynolds                     | 1 N. Clematis St.         |
| $X_{Add}$                     |                   |                                   | Suite 100                 |
| Remove                        |                   |                                   | West Palm Beach, FL 33401 |
| 3)Change                      |                   |                                   |                           |
| Add                           |                   |                                   |                           |
| Remove                        |                   |                                   |                           |
| 4)Change                      |                   | •                                 |                           |
| Add                           |                   |                                   |                           |
| Remove                        |                   |                                   |                           |
| 5)Change                      |                   |                                   |                           |
| Add                           |                   | ,                                 |                           |
| Remove                        |                   |                                   | <del></del>               |
| 6) Change                     |                   | <u> </u>                          |                           |
| Add                           |                   |                                   |                           |
| Remove                        |                   | 7h 4 . £ em                       |                           |
|                               |                   | Page 2 of <b>⊉</b>                |                           |

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| Γh         | e date of each amendment(  | s) adoption: 1/15/2013  |  |  |  |  |
|------------|--|---|--|--|--|--|
|            | ective date <u>if applicable</u> :   | 1/15/2013   |  |  |  |  |
|            |  | (no more than 90 days after amendment file date)  |  |  |  |  |
| <b>A</b> d | option of Amendment(s)   | (CHECK ONE)   |  |  |  |  |
|            | The amendment(s) was/we was/were sufficient for app  | ere adopted by the members and the number of votes cast for the amendment(s) proval.  |  |  |  |  |
|            | 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  | 1/21/13   |  |  |  |  |
|            | Signature  |   |  |  |  |  |
|            | (By the  | chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary) |  |  |  |  |
|            | Stephe   | n E. Myers, Jr.   |  |  |  |  |
|            |  | (Typed or printed name of person signing)   |  |  |  |  |
|            | Preside  | nt  |  |  |  |  |
|            |  | (Title of person signing)   |  |  |  |  |