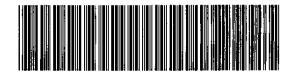
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8/15/11

COVER LETTER

TO: Amendment Section, Division of Corporations

NAME OF CORPORATION: TIGET TEAM	Highland Oaks Middle	goastr Club, Inc.
NAME OF CORPORATION: Trace Team of Document number: (24-324	15614)/NOBO	000816
The enclosed Articles of Amendment and fee are submitted	/	
Please return all correspondence concerning this matter to	the following:	
Starey (Name of Con	Felley tact Person)	
(Firm/ Co	mpany)	
(1.11.2.00	py)	
2125 NE 2	01 5+	
(****	,	
N. Mami Beach (City/ State an	, FL 331 d Zip Code)	79
	. 1	1.
Stacey F1 Co E-mail address: (to be used for	concastino	<u>T</u>
E-mail address: (to be used for	future annual report notificatio	n)
For further information concerning this matter, please call	l:	
Starey Felder (Name of Contact Person)	at (305) 793-	6/68
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department of	State:
Certificate of Status	☐ \$43.75 Filing Fee & 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 P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci	ŕ

Tallahassee, FL 32301

Articles of Amendment & 22-11



Articles of Incorporation

Tiger Team Highland Oaks Middle Booster 2011 AVS/Prc.

FILED

TIGET TEATER HIGHIAN	16 Mars Theare 2008	TATE OF STAT
(Name of Corporation as cu	<u>irrently filed with the Florida Dept</u>	L. of State CRETARY UT 3 ORI
	rrently filed with the Florida Dept	TALLAHASSELT
(Document N	Number of Corporation (if known)	***
ersuant to the provisions of section 617.100 e following amendment(s) to its Articles of		t For Profit Corporation adop
If amending name, enter the new name	e of the corporation:	
he new name must be distinguishable and bbreviation "Corp." or "Inc." <u>"Company</u>		
. Enter new principal office address, if a Principal office address MUST BE A STR		
		<u>.</u>
Enter new mailing address, if applical		
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX	
If amending the registered agent and/o new registered agent and/or the new re		da, enter the name of the
•	egistered office address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address	
		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if chan hereby accept the appointment as registed sition.		d accept the obligations of th
_	Signature of New Registered Agent	t, 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP_	Andrea Lancy	3812 NE 209 th Teima Aventury, FL 33180	☐ Add Remove
SVP	Sharon Curtis	2485 NE 202nd St MIGHT IFC 33180	_
NP_	Michele Levinson	537 HIDISCOS Drive Hallandak, FL 33009	_ ☑ Add _ ☐ Remove
(attach a	additional sheets, if necessary). (Be sp	ecific)	
······································			

The date of each amendment(s) ad	option: 8-9-11
(,	(date of adoption is required)
Effective date <u>if applicable</u> :	8-22-11
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or member adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were
Dated	8-9-//
Signature	Stray Felder
	nairman or vice chairman of the board, president or other officer-if directors
	been selected, by an incorporator – if in the hands of a receiver, trustee, or
other cour	rt appointed fiduciary by that fiduciary)
	Stucey Felder
	(Typed or printed name of person signing)
	Dresident
	(Title of person signing)