## N18000010863

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Camping World Pro	perty Owners Associ	ation, Inc.		
N180	00010863				
The enclosed Articles of Amenda	ient and fee are sub	mitted for filing.			
Please return all correspondence	oncerning this matt	ter to the following:			
Brent Moody					
<del></del>		(Name of Contact P	erson)		
CWI, Inc.					•
·		(Firm/ Compan	y)		
250 Parkway Drive, Suite 270					
		(Address)			
Lincolnshire, Illinois 60069					
		(City/ State and Zip	Code)	<del></del> -	·
jtrent@naisouthcoast.com					
E-mail	address: (to be use	d for future annual re	port notification	n)	<del></del>
For further information concerning	g this matter, please	e call:			20
Jennifer Trent		at	772	286-6292	
(Nan	e of Contact Persor			(Daytime Telephone	Number)
Enclosed is a check for the follow	ring amount made p	ayable to the Florida	Department of	State:	(179 (179 (170
■ \$35 Filing Fee □\$4 C	43.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Addre	SS	St	reet Address		

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

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Camping World Property Owners Association, Inc.				
Name of Corporation as currently filed with the Florida	Dept. of State)			
N18000010863				
(Document Num	ber of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the	tollowing		
A. If amending name, enter the new name of the corpora	tion:			
		_The new		
name must be distinguishable and contain the word "corpord" "Company" or "Co." may not be used in the name.	ition" or "incorporated" or the abbreviation "Corp." o	or "Inc."		
B. Enter new principal office address, if applicable:	250 Parkway Drive, Suite 270			
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Lincolnshire, Illinois 60069			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	250 Parkway Drive, Suite 270			
	Lincolnshire, Illinois 60069			
). If amending the registered agent and/or registered offi	ice address in Florida, enter the name of the			
new registered agent and/or the new registered office a				
Name of New Registered Agent:	l rent			
100 SW 2	Albany Avenue, Second Floor			
New Registered Office Address:	(Florida street address)			
Stuart, Flo				
<del></del>	(City) , Florida (Zip Code)			
New Registered Agent's Signature, if changing Registered	Avent	1-3		
hereby accept the appointment as registered agent. I am fa	miliar with and accept the obligations of the position.	$\circ$		
l <sub>z</sub>				
		<u></u>		
Si	ignature of New Registered Agent, if changing	7-2		
		<u>:</u> =		

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.

Example: X Change X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) <u>x=</u> Change Add	<u>P/D</u>	Stephen Doyle	171 N. Aberdeen Street, Suite 400 Chicago, Illinois 60607
x Remove			
2) Change Add	<u>T/S/D</u>	Conor Keilty	171 N. Aberdeen Street, Suite 400 Chicago, Illinois 60607
X   Remove     Remove	VP/D	Thomas Keilty	171 N. Aberdeen Street, Suite 400 Chicago, Illinois 60607
4) Change Add	<u>P</u>	Brent Moody	250 Parkway Drive, Suite 270 Lincolnshire, Illinois 60069
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
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The date of each amendmen date this document was signed	t(s) adoption:			, if other than the
Effective date <u>if applicable</u> :	6/18/2020			
Enecuve date <u>in applicable</u> .	(no more than	ı 90 days after amendr	nent file date)	. , , , , , , , , , , , , , , , , , , ,
Note: If the date inserted in the document's effective date on the	nis block does not meet the he Department of State's	e applicable statutory frecords.	filing requirements, this dat	e will not be listed as the
Adoption of Amendment(s)	(CHECK O	<u>NE</u> )		
			unton and for the	(-)
The amendment(s) was/w was/were sufficient for a	pproval.	ers and the number of	votes cast for the amendme	onu(S)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
6/18/2020 Dated
Signature  (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)
Brent Moody
(Typed or printed name of person signing)
President

(Title of person signing)