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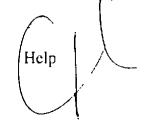
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COR AMND/RESTATE/CORRECT OR O/D RESIGN BLUEGREEN'S BAYSIDE RESORT & SPA CONDOMINIUM ASSOCIA

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Articles of Amendment to Articles of Incorporation of

BLUEGREEN'S BAYSIDE RESORT & SPA CONDOMINIUM ASSOCIATION, INC.

| (Name of Corporation as currently filed with the FI | orida Dept. of State) | |
|--|-------------------------------|---|
| N23000001692 | | |
| (Document | Number of Corporation (if kr | oown) |
| Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation: | Statutes, this Florida Not Fo | r Profit Corporation adopts the following |
| A. If amending name, enter the new name of the co | rporation: | |
| name must he distinguishable and contain the word "company" or "Co." may not be used in the name. | orporation" or "incorporated | The new or the abbreviation "Corp." or "Inc." |
| B. Enter new principal office address, if applicable | | • • |
| (Principal office address MUST BE A STREET ADD | | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO. | <u>x</u>) | · |
| | | ~ |
| D. If amending the registered agent and/or register new registered agent and/or the new registered of | | enter the name of the |
| Name of New Registered Agent: | | |
| | | |
| New Registered Office Address: | (Flo | orda street address) |
| | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Regit I hereby accept the appointment as registered agent. | | the obligations of the position. |
| | Signature of New Registe | red 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 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 | | Doe Jones Smith | | |
|---|-------------|---|---|-----------------|
| Type of Action (Check One) | Title | Name | <u>Addres</u> s | |
| 1) Change | D | DAWN FOX | 4960 CONFERENCE WAY N | ORTH; SUITE 100 |
| AddX Remove | | | BOCA RATON, FL 3343 | 1 |
| 2) Change Add | D | Lauren Cupone | 496 <u>0 CONFERENCE WAY N</u> BOCA RATON, FL 33431 | ORTH; SUITE 100 |
| Remove 3) Change Add Remove | | | | |
| 4) Change Add | | | | |
| Remove 5) Change Add | | | | |
| Remove 6) Change | | | | |
| Add Remove | | | | |
| E. If amending or ac (attach additional) | | rticles, enter change(s) here: (Be specific) | | |
| | | | | |
| | | | | |
| | · | | | |

| The date of each amendment(s) adoption: | , if other than the |
|---|---------------------|
| date this document was signed. | |
| Effective date <u>if applicable</u> : | |
| (no more than 90 days after am | endment file date) |

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

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 | 08/04/2023 | | | |
| | By the chairman or vice chairman of the board, president or other officer-it directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or | | | |
| , | Jade Lopez | | | |
| | (Typed or printed name of person signing) | | | |
| | Attorney-in-Fact | | | |
| | (Title of person signing) | | | |