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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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15 AUG 31 PH 1:45

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 19, 2015

BRETT BARNES
PROPERTY KEEPERS MANAGEMENT, LLC
1350 NE 56TH STREET, SUITE 180
FORT LAUDERDALE, FL 33334

SUBJECT: COUNTRY CLUB VILLAGE MASTER CORPORATION

Ref. Number: N46183

15 AUG 31 AM 7: 40

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please check by each officer name only one, whether to change, add or remove this officer.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 215A00017528

COVER LETTER

| TO: Amendment Section Division of Corporations | , | 15 AUG 31 |
|--|---|---------------------|
| NAME OF CORPORATION: | VILLAGE MASTER CORPORATION | 33 |
| DOCUMENT NUMBER: | | 3 |
| The enclosed Articles of Amendment and fee are sub- | mitted for filing. | 1 5 |
| Please return all correspondence concerning this matte | er to the following: | |
| Brett Barnes | | |
| | (Name of Contact Person) | |
| Property Keepers Management, LLC | | |
| | (Firm/ Company) | |
| 1350 NE 56th Street, Suite 180 | | |
| | (Address) | |
| Fort Lauderdale, FL 33334 | | |
| | (City/ State and Zip Code) | |
| brett@property-keepers.com | | |
| E-mail address: (to be used | d for future annual report notification) | |
| For further information concerning this matter, please | e call: | |
| Brett Barnes | 954 586-511 at | 11 |
| (Name of Contact Person | | e Telephone Number) |
| Enclosed is a check for the following amount made pa | ayable to the Florida Department of State: | |
| ■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status | Certified Copy (Additional copy is enclosed) \$\int \\$3.75 \text{ Filing Fee & Certificate of St Certified Copy (Additional Copy Enclosed)} | atus |
| 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 Circ Tallahassee, FL 32301 | cle |

| (Name of Corporation a | Articles | of Amendme to of Incorporat of iv filed with the | lon | Maste Lorstate | R | |
|--|-------------|--|-----------------------------------|-------------------|---------------|------------------|
| Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the | | | Not For Profit | Corporation ado | pts the fol | loging AUG 31 |
| name must be distinguishable and contain the word "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AL</u> | - le: | 1350 NE 56th | | abbreviation "C | | he new |
| C. <u>Enter new mailing address, if applicable;</u> (Mailing address <u>MAY BE A POST OFFICE B</u> | <u>ox</u>) | Fort Lauderda 1350 NE 56th Suite 180 | | | | |
| D. If amending the registered agent and/or regist new registered agent and/or the new registere | | e address in F | ale, FL 33334 lorida, enter ti | ne name of the | | |
| Name of New Registered Agent: | \$ | . 1/ | vard South | der Remb | aum, | <u>P.L</u> |
| New Registered Office Address: | Pompano : | Beach (City) | (Florida stre | • | 33064 ode) | |
| New Registered Agent's Signature, if changing Reliable in the Interest of the Agent in the Agent | I am fan | nillar with and | el | gations of the po | sition. | |

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 2 Jones 2 Smith | |
|----------------------------------|--------------|---------------------------|---------------------------|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Phange | PRES | Pearl Deutsch | 1350 NE 56th Street |
| $\sqrt{\frac{X}{X}}$ Add | | | Suite 180 |
| Remove | | | Fort Lauderdale, FL 33334 |
| 2) B Change | PRES | Juan Porto | |
| Add | | | |
| X Remove | | | |
| 3) Change | VP | Leonard Levine | 1350 NE 56th Street |
| X Add | | | Suite 180 |
| Remove | | | Fort Lauderdale, FL 33334 |
| 4) D Change | VP | Augustine Semeria | |
| \sqrt{X} Add | | | |
| Remove | | | |
| 5) 🕙 Change | TREASI | Tom Podesta | 1350 NE 56th Street |
| $\sqrt{\frac{X}{Add}}$ | | | Suite 180 |
| Remove | | | Fort Lauderdale, FL 33334 |
| 6) B Change | TREASI | Gilda Olaniel | |
| Add | | | |
| X Remove | | | |
| | | Page 2 of 4 | |

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)

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| Example: X Change X Remove X Add | PT John V Mike SV Sally | Doe Jones Smith | |
|----------------------------------|-------------------------------|-----------------------|---------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 7 🦃 Change | Secretar | Haydee Rodriguez | 1350 NE 56th Street |
| X Add | | | Suite 180 |
| Remove | | | Fort Lauderdale, FL 33334 |
| 8' 4) Change | Secretar | Stanley Ring | |
| Add X Remove | | | <u> </u> |
| Change | | | |
| Add Remove | | | |
| • Change | | | |
| Add | | | |
| S Change | | | |
| Add Remove | | | |
| Change | | | |
| Add | | | |
| Remove | | D 0.44 | |

| | <mark>ng additional Art</mark> ets, if necessary). | (Be specific) | | | |
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| The date of each amendment(s) ad | option: | , if other than th |
|---|---|--|
| date this document was signed. | | |
| Effective date if applicable: | <u>'</u> | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bloc document's effective date on the Dep | ck does not meet the applicable statutory filing requirement partment of State's records. | nts, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were ad was/were sufficient for approva | opted by the members and the number of votes cast for the l. | e amendment(s) |
| There are no members or memb | pers entitled to vote on the amendment(s). The amendment | t(s) was/were |
| Dated 5/29/2015 | | |
| Signature | ie seigh | |
| have not bee | man or vice chairman of the board, president or other officen selected, by an incorporator — if in the hands of a received appointed fiduciary by that fiduciary) | |
| Pearl Det | utsch | |
| | (Typed or printed name of person signing) | |
| President | | |
| | (Title of person signing) | |