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| (Re | equestor's Name) | 21 10 10 11 |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: Exclusive Manage | ment Services, Inc. | | | |
|--|---|--|--|--|--|
| DOCUMENT NUMBER: P12000046768 | | | | | |
| The enclosed Articles of | of Amendment and fee are su | bmitted for filing. | | | |
| Please return all corresp | pondence concerning this ma | tter to the following: | | | |
| | Matthew Simring | | | | |
| _ | | Name of Contact Persor | 1 | | |
| _ | Exclusive Management Serv | ices, Inc. | | | |
| • | | Firm/ Company | | | |
| _ | 235 East Commercial Blvd, S | Suite 201 | | | |
| _ | | Address | | | |
| _ | Lauderdale By The Sea, FL 3 | 33308 | | | |
| _ | | City/ State and Zip Code | • | | |
| mpaz(i | @oneforcewc.com | , | | | |
| | - | sed for future annual report | notification) | | |
| | | | | | |
| For further information | concerning this matter, pleas | se call: | | | |
| Matthew Simring | | 954 | 816-2417 | | |
| Matthew Simring at (954) 816-2417 Name of Contact Person Area Code & Daytime Telephone Nu | | de & Daytime Telephone Number | | | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | rtment of State: | | |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & 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) | | |
| Amer | ing Address ndment Section tion of Corporations | Amend | Address ment Section n of Corporations | | |

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

| Exclusive Management Services, Inc. | |
|---|--|
| | as currently filed with the Florida Dept. of State) |
| P12000046768 | |
| (Document | t Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation: | tatutes, this Florida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the corpo | oration: |
| NA | The new |
| | "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE | ESS) |
| C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX) | W/A |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered offi | |
| | |
| | (Florida street address) |
| New Registered Office Address: | , Florida (City) (Zip Code) |
| | ered Agent: m familiar with and accept the obligations of the position. re of New Registered Agent, if changing |
| Signaiur | re of New Registerea 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 | PT | John Doe | |
|----------------------------|-----------|-----------------|----------------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | <u>P</u> | Brian Torres | |
| Add | | | |
| Remove | | | |
| 2) Change | P | Matthew Simring | 235 East Commercial Blvd |
| x Add | | | Suite 201, Lauderdale By The Sea |
| Remove | | | Florida, 33308 |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | - | |
| Add | | | |
| Remove | | | |
| 6) Change | | _ | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Arti Attach additional sheets, if necessary). | (Be specific) |
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| f an amendment provides for an exch | nange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer (if not applicable, indicate N/A) | ndment if not contained in the amendment itself: |
| | |
| | |
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| | |

| • | May 3, 2016 | |
|--|---|---------------------------------------|
| The date of each amendment(s) date this document was signed. | adoption: | , if other than the |
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in thi document's effective date on the | s block does not meet the applicable statutory filing requirements, Department of State's records. | this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amen sufficient for approval. | dment(s) |
| | pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment | |
| "The number of votes ca | st for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| · | (voting group) | |
| | dopted by the board of directors without shareholder action and sha | ıreholder |
| The amendment(s) was/were a action was not required. | dopted by the incorporators without shareholder action and shareholder | rlder |
| May 3, 2 Dated Signature | 016 | |
| selec | director, president or other officer - if directors or officers have no ted, by an incorporator - if in the hands of a receiver, trustee, or oth inted fiduciary by that fiduciary) | |
| | Hal Cherney | |
| | (Typed or printed name of person signing) | |
| | Vice President | |
| | (Title of person signing) | · · · · · · · · · · · · · · · · · · · |