## P14000038587

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## **COVER LETTER**

TO: Amendment See Division of Corp		•			
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NAME OF CORPO	ration: Boca G	reens Countr	y Club Inc.		
DOCUMENT NUM	0 11155	38587	·		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Miriam Co	rrar			
	Boca Green	Name of Contact Persor  S COUATRY  Firm/ Company	Elublac.		
	19642 Trophy Drive Address				
	116 49 110	Address			
	Boca Raton, FL 33498				
		City/ State and Zip Code			
	mirian @b	nca greens Cou	ntry club, com		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Miriam	Carrac	<b>C</b> / .	05: 231/		
		at ( ) 6 \	901-3314 de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327			entre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation of

Boca Greens Country Cl	ub Inc.
(Name of Corporation as current)	v filed with the Florida Dept. of State)
P14000038587	
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
AIA	The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", -> "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	NA
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	NA P. S.
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent NA	
	reet address)
New Registered Office Address:	(City) , Florida (Zîp Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to	≟
Signature of New R	egistered Agent, if changing

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u> <u>John</u>	<u>i Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name /	Address
1) Change	D	Thomas Weaver	19642 Trophy Dr
Add			Boca Raton FL 33498
X Remove 2) Change	Ď	Ralph Little	Boca Rator, FL 33198
Add	<u> </u>		
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del></del>	<del></del>
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional s	ding additional Articles, enter change(s) here: cheets, if necessary). (Be specific)	
K.	i J	
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		·-·
If an amondment .	provides for an avaluage realization or consollation of issued shapes	
provisions for imp	provides for an exchange, reclassification, or cancellation of issued shares, plementing the amendment if not contained in the amendment itself:	
(if not applica	ible, indicate N/A)	
`	NIA	
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	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment fit	le date)
<b>Note:</b> If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requipartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
★ The amendment(s) was/were addaction was not required.  ■ The amendment(s) was/were addaction was/were addaction was not required.  ■ The amendment(s) was/were addaction was/were	pted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for flicient for approval.	the amendment(s)
	roved by the shareholders through voting groups. The feach voting group entitled to vote separately on the amo	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	27-2020	
Signature	WEN	
	rector, president or other officer - if directors or officers	s have not been
selected	l, by an incorporator - if in the hands of a receiver, trust	
appoint	ed fiduciary by that fiduciary)	
	MILLS AVMEL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	