P17000096095

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TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

2018 JAN -9 AH 3 21 NAME OF CORPORATION: PGA DESIGN MANAGEMENT, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SAMUEL J. CANTOR Name of Contact Person SAMUEL J. CANTOR, P.A. Firm/ Company 426 S. MILITARY TRAIL Address DEERFIELD BEACH, FL 33442 City/ State and Zip Code SAM@SAMCANPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: PATRICIA KOHSMAN Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

> 2661 Executive Center Circlé Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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PGA DESIGN MANAGEMENT, INC (Name of Corporation as currently filed with the Florida Dept. of State) P17000096095 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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	<u>PT`</u> <u>Joh</u> i	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
X Add	<u>SV</u> <u>Sail</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	BRUCE L. SCHREIBER	426 S. MILITARY TRAIL
X Add			DEERFIELD BEACH, FL 33442
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
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Add			
Remove			

Attach additional sheets, if necessary). (Be specif	change(s) here: ic)		
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f an amendment provides for an exchange, recla	ssification, or cancellatio	n of issued shares,	
provisions for implementing the amendment if a	ot contained in the amen	dment itself:	
provisions for implementing the amendment if n (if not applicable, indicate N/A)	ot contained in the amen	dment itself:	
provisions for implementing the amendment if n	ot contained in the amen	dment itself:	
provisions for implementing the amendment if n	ot contained in the amen	dment itself:	
provisions for implementing the amendment if n	ot contained in the amen	dment itself:	
provisions for implementing the amendment if n	ot contained in the amen	dment itself:	
provisions for implementing the amendment if n	of contained in the amen	dment itself:	1

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 da	ys after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable artment of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The num	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were appr must be separately provided for e	oved by the shareholders through ach voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
"The number of votes cast for	or the amendment(s) was/were sui	ficient for approval
by	(voting group)	,
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without s	harcholder action and shareholder
January 4, 20	018	
Signature (By a dire selected,	extor, president or other officer -	il-directors or officers have not been ds of a receiver, trustee, or other court
R	OBERT BLATT	
_	(Typed or printed name	of person signing)
P	RESIDENT	
-	(Title of per	son signing)