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APPROVED AND FILED

C. LEWIS

APR 1 6 2014

EXAMINER



Division of Cor	poration

NAME OF CORPORATION: Seminole Properties | Inc

DOCUMENT NUMBER: P96000049801

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laura Sa

Name of Contact Person

Seminole Tribe of Florida

Firm/ Company

6300 Stirling Road

Address

Hollywood, Florida 33024

City/ State and Zip Code

Isa@semtribe.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laura Sa

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

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 Circle

Tallahassee, FL 32301

APPROVE ... AND FILED

Articles of Amendment to Articles of Incorporation of

14 APR 10 PM 2: 18

	Sem	inole	Pro	perti	es I	inc
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SECKETARY OF THE ATT.

(Name of Corporation as currently filed with the Florida Dept. of State)
P96000049801
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s 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,
(City) (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, nan	ne, 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>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	S	Marcellus W Osceola Jr.	6300 Stirling Road
Add			Hollywood, FL 33024
Remove			
2) Change	S	Christopher Osceola	6300 Stirling Road
Add			Hollywood, FL 33024
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		 _	
Remove			
kemove			

	icles, enter change(s) here: (Be specific)
	
f an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:



The date of each amendmen		April 4, 2014	14 APR 10 PH 2: 18	, if other than the
date this document was signe Effective date if applicable:	Amril 4	J, 2014	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
		(no more than 90 do	nys after amendment file date)	-
Adoption of Amendment(s)	(<u>(</u>	CHECK ONE)		
The amendment(s) was/w by the shareholders was/w			mber of votes cast for the amendment(s)	
			voting groups. The following statement separately on the amendment(s):	
"The number of vot	es cast for the an	nendment(s) was/were su	officient for approval	
by			"	
action was not required.			hout shareholder action and shareholder shareholder action and shareholder	
Dated	April 4, 20	14	_	
Signature	Manuel Tige	er		
(By a director, proselected, by an in	resident or other officer -	if directors or officers have not been nds of a receiver, trustee, or other court	•
	Manua	l Tiger		
		(Typed or print	ed name of person signing)	-
	D			
		(Title o	of person signing)	-