

# CERTIFICATE OF COMPLETION

## Board Member Certification

THIS IS TO CERTIFY THAT

**Kathy Rowe**

Has Completed the Above Training/Educational Program and Satisfied the  
Statutory Requirement for Board Member Certification

*Daniel J. Greenberg*

Signature/Stamp of Trainer

February 20, 2025

Date of Completion

IF YOU HAVE ANY CONCERN THAT THE COURSE YOU HAVE JUST COMPLETED DID NOT MEET THE LEARNING OBJECTIVES SET OUT IN THE COURSE MATERIALS, DID NOT COVER THE SUBJECT MATTER OF THE COURSE, OR WAS A SALES PRESENTATION; PLEASE CONTACT THE COUNCIL'S OFFICE IN WRITING AT: DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION, REGULATORY COUNCIL OF COMMUNITY ASSOCIATION MANAGERS. 2601 BLAIR STONE ROAD, TALLAHASSEE, FLORIDA 32399-0771.