

726149

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B.A.

TBrown 9-14-11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Venice Isle Tower Association. Inc.

DOCUMENT NUMBER: 591462050

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

Please return all correspondence concerning this matter to the following:

Nancy Piper

(Name of Contact Person)

Stevens & Goldwyn, PA

(Firm/ Company)

2 South University Drive, Suite 315

(Address)

Plantation, FL 33324

(City/ State and Zip Code)

npiper@stevensandgoldwyn.com

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

For further information concerning this matter, please call:

Nancy Piper

(Name of Contact Person)

at (954) 458-9393

(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

Venice

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: VENICE ISLE TOWER ASSOCIATION INC

2. The principal office address: 155 ISLE OF VENICE, SUITE 704, FORT LAUDERDALE, FL 33301

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4-17-73 Document number: 726149

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

BECKER & POLIAKOFF, PA

3111 STIRLING ROAD

FT LAUDERDALE, FL 33312

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

STEVENS & GOLDWYN, PA

2 SOUTH UNIVERSITY DRIVE, SUITE 315

P.O. Box NOT acceptable

PLANTATION, FL 33324

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TALLAHASSEE, FLORIDA

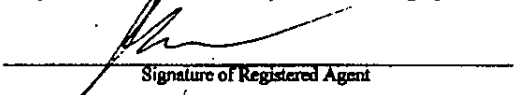
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

LUDWIG J. KORAR PRES
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

9/8/11
Date

If signing on behalf of an entity:

Brian S. Goldwyn
Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314