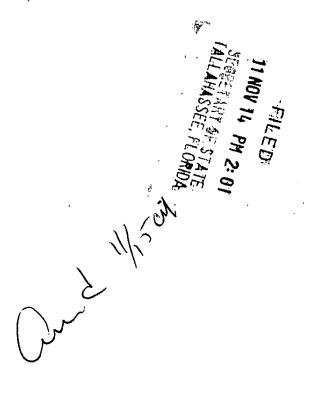
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Special Instructions to	Filing Officer:	
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11/14/11--01022--006 \*\*35.00



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: VENICE ISLE TO	OWER ASSOCIATION INC.	
DOCUMENT NUMBER: 726149		
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
NANCY PIPER		
(Name o	of Contact Person)	
STEVENS & GOLDWYN, P.A.		· · · · · · · · · · · · · · · · · · ·
(Fir	m/ Company)	
2 SOUTH UNIVERSITY DRIVE,		·
	(Address)	
PLANTATION, FL 33324	tate and Zip Code)	
(City/ St	tate and Zip Code)	
NPIPER@STEVENSANDGOLDV E-mail address: (to be us	WYN.COM sed for future annual report notification.	ication)
For further information concerning this matter, plea	se call:	
NANCY PIPER	at (954 ) 458-93	93
(Name of Contact Person)	(Area Code & Day	rtime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Departm	ent of State:
☑\$35 Filing Fee	□\$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 Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ations ater Circle

Varice

## Articles of Amendment to Articles of Incorporation of

VENICE ISLE TOMED ASSOCIATION INC	्रेड 		
VENICE ISLE TOWER ASSOCIATION INC  (Name of Corporation as currently filed with	the Florida Dept. of State)		
726149			
(Document Number of Corporat	tion (if known)		
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopted the following amendment(s) to its Articles of Incorporation:			
A PRICE CONTROL FRANCE CONTROL OF THE CONTROL OF TH	<del></del>		
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may no			
B. Enter new principal office address, if applicable:	C/O STEVENS & GOLDWYN, P.A.		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	2 S. UNIVERSITY DRIVE #315		
	PLANTATION, FL 33324		
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	C/O STEVENS & GOLDWYN, P.A.		
	2 S. UNIVERSITY DRIVE #315		
	PLANTATION, FL 33324		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad			
Name of New Registered Agent: ***PLEASE CO	RRECT STREET ADDRESS		
2 S. UNIVERSITY DRIVE SUITE 315  New Registered Office Address: (Florida street address)			
New Registered Office Address: (Flor PLANTATIO	·		
PLANTATIO	(City) , Florida 33324 (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, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officers/directors.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)

Name

Address

Title(s)	,	<u>Name</u>		Address	
1)	-				
			_		
2)	-				
3)					
·)	-				
4)	-				
5)	_				
6)	_				
					_
If REMOV	NG an officer	and/or director, please list th	e title(s) and nar	ne of the officer/director	to be removed:
Title(s)	<u>Name</u>		Title(s)	Name	
1)			4)		
2)			5)		

3)\_

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	_	
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* 1 * *	
The date of each amendment(s	s) adoption: (date of adoption- required)
Ellective date il applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament fite date)
	•
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for approx	adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or men	mbers entitled to vote on the amendment(s). The amendment(s) was/were tors.
Dated	11/3/1/
Signature	lection Sileon
	he chairman or vice chairman of the board, president or other officer-if directors
have	not been selected, by an incorporator - if in the hands of a receiver, trustee, or
	court appointed fiduciary by that fiduciary)
· ·	LUDWIG J. KUNAR
	(Typed or printed name of person signing)
	RESIDENT -
	(Title of person signing)

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