# 765997

(Re	equestor's Name)	
(Ac	ldress)	
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<b>(</b>	····-,	
(Cit	ty/State/Zip/Phone	e #)
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Amerd C.COULLIETTE MAY 1 0 2011

**EXAMINER** 

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: TOWNE SQU	ARE OWNERS ASSOC	CIATION, INC.
DOCUMENT NUM	BER: 765997		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	SHAL	OM YEHIEL	
	(Name of	Contact Person)	
	(Firm	n/ Company)	
		85TH AVENUE	
	(,	Address)	
		AC, FL. 33321 tte and Zip Code)	
	YEHIEL@E E-mail address: (to be use	BELLSOUTH.NET and for future annual report notific	ation)
For further information	on concerning this matter, pleas	e call:	
SHALOM YEHIEL		at ( 954 ) 721-862 (Area Code & Dayti	20 <u> </u>
		Area Code & Dayti payable to the Florida Departmen	
☑ \$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)
Amer Divis P.O. I	ng Address Idment Section Idm of Corporations Box 6327 Dassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente	

Tallahassee, FL 32301

#### MELVILLE & SOWERBY, P.L.

ATTORNEYS AT LAW
LAUREL PROFESSIONAL PARK
2940 SOUTH 25TH STREET
FORT PIERCE, FLORIDA 34961-5605

HAROLD G. MELVILLE\*
DAVID N. SOWERBY\*\*

TELEPHONE (772) 464-7900 FAX (772) 464-8220

BOARD CERTIFIED CIVIL TRIAL LAWYER AND BOARD CERTIFIED BUSINESS LITIGATION LAWYER

\*\*BOARD CERTIFIED REAL ESTATE LAWYER

May 2, 2011

#### **VIA FEDERAL EXPRESS**

Florida Department of State Division of Corporations Amendment Section Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

RE: TOWNE SQUARE OWNERS ASSOCIATION, INC. DOCUMENT NUMBER 765997

Enclosed are the Articles of Amendment for the referenced non profit corporation.

Also enclosed is our check in the amount of \$35.00 in payment of the fees.

Should you have any questions or require any additional information please contact our offices immediately.

Sincerely,

Nanette Passafiume

Legal Assistant to David N. Sowerby, Esq.

:np

Enclosures

### **Articles of Amendment Articles of Incorporation**

of

TOWNE SQUARE OW	NERS ASS	SOCIATION, INC.	<b>=</b>
(Name of Corporation as curren	tly filed with	the Florida Dept. of State	
7	65997		ယ်
(Document Numb	per of Corporati	ion (if known)	<u> </u>
TOWNE SQUARE OW  (Name of Corporation as current  (Document Number Pursuant to the provisions of section 617.1006, Find the following amendment(s) to its Articles of Inc.  A. If amending name, enter the new name of the new name must be distinguishable and contabbreviation "Corp." or "Inc." "Company" or "B. Enter new principal office address if applied to the contabbre of the co	lorida Statutes. orporation:	this <i>Florida Not For Pro</i>	fit Corporation add
A. If amending name, enter the new name of	the corporatio	<u>n:</u>	
The new name must be distinguishable and conabbreviation "Corp." or "Inc." "Company" or	ntain the word "Co." may not	"corporation" or "incor be used in the name.	porated" or the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		5715 NW 85TH AVENUE	
		TAMARAC, FL. 3332	21
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u> )	5715 NW 85TH AVE	NUE
		TAMARAC, FL. 3332	1
D. If amending the registered agent and/or re new registered agent and/or the new regist			the name of the
Name of New Registered Agent:	SHA	LOM YEHIEL	
	5715 NV	V 85TH AVENUE	
New Registered Office Address:	(Flori	da street address)	
_	т		, Florida 33321
_		(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

Page 1 of 3

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	R. DALE BASS	8686 Andrews Ave. Fort Pierce, FL 34945	Add ☑ Remove
SDT	DIANNA L. BASS	8686 Andrews Ave. Fort Pierce, FL 34945	
PD	SHALOM YEHIEL	5715 NW 85TH AVENUE TAMARAC, FL. 33321	☑ Add □ Remove
	nding or adding additional Articles, additional sheets, if necessary). (Be		
			., .,

TITLE NAME ADDRESS TYPE OF ACTION

SDT DORIS YEHIEL 5715 NW 85<sup>TH</sup> AVENUE TAMARAC, FL. 33321

ADD

The date of each amendmen	t(s) adoption: Apr	il 29, 2011	
	A 11.00 0044	(date of adoption is required)	` ,
		than 90 days after amendment file d	ate)
Adoption of Amendment(s)	( <u>CHE</u>	CK ONE)	
The amendment(s) was/we was/were sufficient for app		nembers and the number of votes cas	t for the amendment(s)
There are no members or adopted by the board of di		vote on the amendment(s). The ame	endment(s) was/were
Dated_Apri	il 29, 2011		
Signature _	on	no well	
(B:	y the chairman or vi- ve not been selected	ce chairman of the board, president of the hand incorporator – if in the hand iduciary by that fiduciary)	
		SHALOM YEHIEL	
	(Type	d or printed name of person signing	)
		President/Director	
		(Title of person signing)	

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