

ND5000009014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

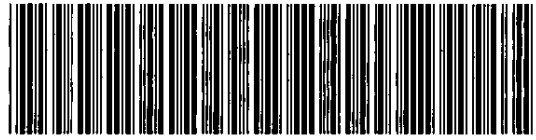
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 JAN 12 AM 8:09

Amend
ca 1/13/10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Turnberry Village South Tower Condominium Association, Inc.

DOCUMENT NUMBER: 005000009014

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

Please return all correspondence concerning this matter to the following:

Fabiola Gutierrez de Pinedas
(Name of Contact Person)

Turnberry Village South Tower Condominium Association, Inc.
(Firm/ Company)
c/o: Management Office
20000 E. County Club Dr.
(Address)

Aventura FL. 33170
(City/ State and Zip Code)

manager@TBVCondo.com
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fabiola Gutierrez de Pinedas at (305) 932-9705 Ext. 14
(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:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 29, 2009

FABIOLA GUTIERREZ DE PINERES
C/O MANAGEMENT OFFICE
20000 E. COUNTRY CLUB DR.
AVENTURA, FL 33190

SUBJECT: TURNBERRY VILLAGE SOUTH TOWER CONDOMINIUM
ASSOCIATION, INC.
Ref. Number: N05000009014

We have received your document for TURNBERRY VILLAGE SOUTH TOWER
CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$25.00.
However, the enclosed document has not been filed and is being returned for the
following correction(s):

The fee to file your document is \$35.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 109A00039411

2010 JAN 12 AM 10:00
SERIAL 11111111
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Turnberry Village South Tower Condominium Association, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

no 5000009014

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

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: _____

New Registered Office Address: _____

(Florida street address)

(City)

Florida

(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

10 JAN 12 AM 8:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
<u>D</u>	<u>Ellen Lederman</u>	_____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>D</u>	<u>Maria Bensa</u>	<u>cto Management Office</u> <u>1990 E. County Club</u> <u>Aventura, FL 33170</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

David Ghelman - PD (President)
Mort Nashman - VP (Vice President)

* please revise titles as stated above *

The date of each amendment(s) adoption: N/A
(date of adoption is required)

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated Dec 18 / 2009

Signature [Handwritten Signature]

(By the 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 other court appointed fiduciary by that fiduciary)

DAVID SHELMAN
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)