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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: DOWNTOUN PARK CONDOMINIUM ASSOCIATION, INC.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JUHANI ISOKANGAS (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
188 W. MONTAUK HOY, SUITE E 5
HAMPTON BAYS NY 11946  (City/State and Zin Code)
(Osly) base and Exp code)
TOHN • TSOCBARTATSOCOM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JOHN ISO at (631) 728-7375
(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:
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#### **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

### Articles of Amendment to Articles of Incorporation

14 JUL 23 III **2:** 10

	of	14 JUL 23	::: <b>2:</b> 13
(Name of Corporation as currently filed with the Flo	n ASSOCIAT.	ON INC	2
(Document Number of Co	orporation (if known)	_ *	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i>	Profit Corporation	n adopts the followin
A. If amending name, enter the new name of the corporati	on:		
NI	A		The we
name must be distinguishable and contain the word "corporate	ion" or "incorporated"	or the abbreviati	on "Corp." or "Inc."
"Company" or "Co," may not be used in the name.	,	1	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/H	/	
(Francipal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	).	
,			<u> </u>
			<del>,</del>
D. If amending the registered agent and/or registered offic	e address in Florida, e	nter the name of	the
new registered agent and/or the new registered office ac			_
Name of New Registered Agent: /V//	9		
,			
	Florida street address)		
New Registered Office Address:			
***************************************	·	, Florida	
(City)			(Zip Code)
New Registered Agent's Signature, if changing Registered A		11	***
hereby accept the appointment as registered agent. I am fam			e position.
	V / F) existered Agent, if char		
Signature of New R	eoistered Agent it char	าดาทด	

Page 1 of 4

## 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John I V Mike J SV Sally S	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	<u>V</u>	JERRY LOMAX	896 N. FEDERALHWY.  APT # 422  LAWTANA FL 33462
2) Change Add Remove	<u></u>	SVEN KLAUS	BREEZE 3 LAKE WORTH, FL 33460
3 ) Change Add Remove			
4) Change Add Remove	<del></del>		
5) Change Add Remove	<del></del>		
6) Change Add			

f amending or adding additional Artistach additional sheets, if necessary).	(Be specific)
	NA
	<i></i>
· · · · · · · · · · · · · · · · · · ·	
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The date of each amendment(s) addate this document was signed.	option: /V/B	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more man so any a gree, amoramous greens, and so	•
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adwas/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)	
adopted by the board of director  Dated  Signature	in 18 min	
have not bee	nan or vice chairman of the board, president or other officer-if directors in selected, by an incorporator if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
J	TEOKANGAS (Typed or printed name of person signing)	
	PRESIDENT- DIRECTOR	
	(Title of person signing)	