## 721773

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

•		
NAME OF CORPORATION: TOWNHOL	JSES AT NO	VA CONDOMINIUM
DOCUMENT NUMBER: 721773		
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
GEORGE CORNISH		
	(Name of Contact Persor	n)
HOMESITE MANAGEME	ENT LLC	
	(Firm/ Company)	
6511 NOVA DR. #169		
	(Address)	
DAVIE, FL 33317		
	(City/ State and Zip Code	2)
cornishg@bellsou		
E-mail address: (to be used	for future annual report i	iotification)
For further information concerning this matter, please	call:	
GEORGE CORNISH	<sub>at</sub> 954	791-1339  ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Depa	artment of State:
S35 Filing Fee S43.75 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	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Inssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

m1 m 1		1 1144
The Townhouses at Nova Condom:	inium, Inc.	a) 2014 JUN -2 AM11: 52
(Name of Corporation as currently filed with the	Florida Dept. of Stat	<b>C</b> }
		THE PROPERTY OF STATE  (A) THE COMPANY OF STATE  (B) THE COMPANY OF STATE  (C) THE COMPANY OF ST
(Document Number of	Corporation (if know	M) FALLAHASSEE, FLORIDA
	•	49.
rsuant to the provisions of section 617.1006, Florida Stanendment(s) to its Articles of Incorporation:	tutes, this <i>Florida No</i>	t For Profit Corporation adopts the following
If amending name, enter the new name of the corpor	ration <u>:</u>	
I/A		The
me must be distinguishable and contain the word "corpo	oration" or "incorpor	The negated" or the abbreviation "Corp." or "Inc.
Company" or "Co." may not be used in the name.	station is incorpor	med of the above ration corp. or the
	N/A	
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRES		
incipul office adaress <u>MOST BE A STREET ADDRES</u>	<u>33</u> )	
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
	•	
. If amending the registered agent and/or registered of		ida, enter the name of the
new registered agent and/or the new registered offic	e agoress:	
Name of New Registered Agent: N/A		
	(Florida street addres	el
New Registered Office Address:	(1 to the officer beauty)	,
N/A		
	itv)	, Florida(Zip Code)
ici	ny)	(Zip Code)
ew Registered Agent's Signature, if changing Register	red Agent:	
nereby accept the appointment as registered agent. I am	n familiar with and ac	cept the obligations of the position.
Signature of N	low Registered Agent	if changing

## 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	<u>V</u> <u>Mik</u>	n <u>Doe</u> de Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	<u>V</u>	MIGUEL A. DIAZ	3726 SW 60 TERR.
Add			DAVIE, FL 33314
Remove			
2) Change	D	PETER C. WEINRICH	3794 SW 60 TERR.
X Add			DAVIE, FL 33314
Remove			
3 ) Change	<u>D</u>	MARGET KUDRICK	3666 SW 60 TERR.
Add			DAVIE, FL 33314
X Remove			
4) Change	VD	CAROL PALUMBO	3680 SW 60 TERR.
Add			DAVIE, FL 33314
X Remove			
5) Change	T	SUSAN KEDZIORA	3650 SW 60 TERR.
X Add			DAVIE, FL 33314
Remove			
6) Change	S	GEORGE CORNISH	3682 SW 60 TERR.
X			DAVIE, FL 33314
Remove			

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:

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Example:  X Change X Remove X Add	PT John D V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	EUCLIDES A. SANCHEZ	3706 SW 60 TERR.
			DAVIE, FL 33314
Remove			
2) Change			
			<u> </u>
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
_			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
N/A	

The date of each amendment(s) adoption: 4/1//2014 ate this document was signed.	, if other than the
iffective date if applicable: 4/17/2014	
(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendmen was/were sufficient for approval.	t(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	е
Dated 5/26/2014	·
Signature Roberta Jenebky	
(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)	
ROBERTA JENEFSKY	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	