725426

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(Address)	70033439996
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(City/State/Zip/Phone #)	
(Business Entity Name)	09/25/1801010003 **
(Document Number)	TALL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	NORTH CONDOMINIUM ASSOCIATION (THE TOWER), INC
725426 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are subm	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
JOSEPH F. LO BELLO	
	(Name of Contact Person)
JOSEPH F. LO BELLO, CPA	
	(Firm/ Company)
840 OCEAN DRVIE	
	(Address)
JUNO BEACH, FL 33408	
((City/ State and Zip Code)
JLOBELLO@AOL.COM	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please of	call:
DEBRA LO BELLO	561 386-8278 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pay	yable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (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

Articles of Amendment to Articles of Incorporation of

JUNO BY THE SEA NORTH CONDOMINIUM ASSOCIATION (THE TOWER), INC.

		┿-
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)	ł
725426		
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Staturamendment(s) to its Articles of Incorporation:	ies, this Florida Not For Profit Corporation adopts the	e foll
A. If amending name, enter the new name of the corpora	tion:	
		$_{Th}$
name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ttion" or "incorporated" or the abbreviation "Corp."	or "
B. Enter new principal office address, if applicable:		_
(Principal office address MUST BE A STREET ADDRESS)	
	<u>></u> :	,
	TAS:	ر ک
C. Enter new mailing address, if applicable:		7
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u></u> ≒
		<u>_</u>
	; †	-
D. If amending the registered agent and/or registered off		
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:		
	1:	
	(Florida street address)	
New Registered Office Address:		
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		
	Signature of New Registered Agent, if changing	_

Page 1 of 4

address of each Offic (Attach additional shee Please note the officer P = President; V = Vic	er and/or Dir ets, if necessar /director title t ee President; T O = Chief Find	y) by the first letter of the office title: = Treasurer; S= Secretary; D= Director; Th ancial Officer. If an officer/director holds m	R= Trustee; C = Chairman or Clerk; CL
	leaves the corp	wing manner. Currently John Doe is listed a poration, Sally Smith is named the V and S. 7 Smith, SV as an Add.	
Example: X Change X Remove X Add	V	ohn Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	p	DUBIN, MARK	840 OCEAN DRIVE #106
Add			JUNO BEACH, FL 33408
Remove 2) X Change	р	DICHIARO, ANTHONY	840 OCEAN DRIVE #802
2) Change	·	· · · · · · · · · · · · · · · · · · ·	JUNO BEACH, FL 33408
Remove	r.	MANGANELLI JOHN	940 OCT AN DRIVE #704
3) Change	<u>D</u>	MANGANELLI, JOHN	JUNO BEACH, FL 33408
Add			
4) Change		· · · · · · · · · · · · · · · · · · ·	
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove		Page 2 of 4	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
N/A		
·	<u> </u>	

	The date of each amendment(s) adoption:	
date	e this document was signed.	
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	
_	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not tument's effective date on the Department of State's records.	be list
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	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 9/12/3019	5 5 9
	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)	
	ANTHONY DICHIARO	
	(Typed or printed name of person signing)	
	PRESIBENT	
	(Title of person signing)	