## 727429

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Long Key Townhouse Co	ndominum Association, Inc.
727429 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted	d for filing.
Please return all correspondence concerning this matter to	l the following:
Michael McCartney	ne of Contact Person)
(Nar	HAS AS
	(Firm/ Company)
PO Box 406	TEL S
	(Address)
Long Key, FL 33001	
(City.	/ State and Zip Code)
longkeytownhousecondo@gmail.com	
E-mail address: (to be used for fi	Iture annual report notification)
For further information concerning this matter, please call:	
Michael McCartney	716 523-1558
(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:
(Ad	75 Filing Fee & S52.50 Filing Fee tified Copy Certificate of Status ditional copy is Certified Copy losed) (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tatlahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Long Key Townhouse Condominum Association, Inc.	
(Name of Corporation as currently filed with the Florida	Dept. of State)
727429	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ntion:
	The nev
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	
	1 × 5 × 5 × 5 × 5 × 5 × 5 × 5 × 5 × 5 ×
	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	. C 五家
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D. If amending the registered agent and/or registered offi	ee address in Blorida, enter the name of the
new registered agent and/or the new registered office :	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent
hereby accept the appointment as registered agent. I am fai	niliar with and accept the obligations of the position.
Siz	gnature of New Registered Agent, if changing

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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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Addre	<u>ss</u> s
1) Change Add Remove	<u>s</u>	Michael McCa	tney 65700 Long F	Overseas Hwy (ey, FL 33001
2) Change Add				SS - 1
Remove 3) Remove Add Remove	<del>-,</del>			
4) Change Add				
Remove    Change				
6) Change Add				
E. If amending or adding (attach additional sheets			e(s) here:	

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The date of each amendment(s) ad late this document was signed.	option:	, '	f other than the
Effective date <u>if applicable</u> :			
	(no more than 90 da	y after amendment file date)	
Note: If the date inserted in this blococument's effective date on the Dep	ck does not meet the applipartment of State's records	cable statutory filing requirements, this date will not be l s.	isted as the
doption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad was/were sufficient for approval	opted by the members and	the number of votes cast for the amendment(s)	

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There are no mount		الوبطية للجارات	2.0
adopted by the boar	ers or members entitled to vote or rd of directors.	the amendment(s). The amendment(s) was/were	
Dated	6-1-24		
-		The Carlot	
Signature _	145		
	y the fairman or vice chairman	of the board, president or other officer-if directors	FVE TO
. (	other court appointed fiduciary by	rporator - if in the hands of a receiver, trustee, or that fiduciary)	5
	Jovan Broche		
	(Typec	or printed name of person signing)	
	President		
		(Title of person signing)	