

745939

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

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12 NOV - 5 AM 11:16

SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS

Amend  
10 11.5.13

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

STONEWOOD TOWNHOMES ASSOCIATION, INC

NAME OF CORPORATION: \_\_\_\_\_  
745939

DOCUMENT NUMBER: \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

GIUSEPPE CONOSCENTI

\_\_\_\_\_  
(Name of Contact Person)

TC PROPERTY MANAGEMENT, LLC

\_\_\_\_\_  
(Firm/ Company)

813 N ATLANTIC AVENUE

\_\_\_\_\_  
(Address)

COCOA BEACH, FL 32931

\_\_\_\_\_  
(City/ State and Zip Code)

GCONOSCENTI66@GMAIL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GIUSEPPE CONOSCENTI

\_\_\_\_\_  
(Name of Contact Person)

at ( 321 ) 693-7751

\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

October 18, 2012

GIUSEPPE CONOSCENTI  
TC PROPERTY MANAGEMENT, LLC  
813 N ATLANTIC AVENUE  
COCOA BEACH, FL 32931

SUBJECT: STONEWOOD TOWNHOMES ASSOCIATION, INC.  
Ref. Number: 745939

We have received your document for STONEWOOD TOWNHOMES ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have listed the incorrect name of the corporation on the form and the first page of the amendment is for a profit corporation. Please see the enclosed form and submit it completed correctly in its entirety.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 412A00025680

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NOV - 5 AM 9:31  
DIVISION OF STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment  
to  
Articles of Incorporation

STONEWOOD TOWNHOMES ASSOCIATION, INC.

745939 Name of Corporation as currently filed with the Florida Dept. of State

(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:**  
N/A

*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)

813 N ATLANTIC AVENUE  
COCOA BEACH, FL 32931

**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: TC PROPERTY MANAGEMENT, LLC

813 N ATLANTIC AVENUE

(Florida street address)

New Registered Office Address:

COCOA BEACH, Florida 32931  
(City) (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

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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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>PD</u>	<u>BUTCH, PARK I.</u>	<u>1401 E BROWARD AVENUE</u>
<input type="checkbox"/> Add			<u>SUITE 110</u>
<input checked="" type="checkbox"/> Remove			<u>FT LAUDERDALE, FL 33001</u>
2) <input type="checkbox"/> Change	<u>VD</u>	<u>GAGNON, STEPHANIE</u>	<u>325 E UNIVERSITY BLVD.</u>
<input type="checkbox"/> Add			<u>MELBOURNE, FL 32901</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>PD</u>	<u>ESO EQUITY GROUP, LLC</u>	<u>813 N ATLANTIC AVENUE</u>
<input checked="" type="checkbox"/> Add			<u>COCOA BEACH, FL 32931</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>VD</u>	<u>COSHED, LLC</u>	<u>29033 SILVER CREEK RD</u>
<input checked="" type="checkbox"/> Add			<u>AGOURA, CA 91301</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

[illegible]

09/28/2012

The date of each amendment(s) adoption: \_\_\_\_\_

Effective date if applicable: \_\_\_\_\_  
(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 10/30/12

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)

Giuseppe Condolenti

(Typed or printed name of person signing)

OWNER

(Title of person signing)