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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:Towles Court Neighbors	nborhood Association, Inc	
DOCUMENT NUMBER: D 2300000	1716 filed Apr 18, 2023	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this mat	er to the following:	
anna m bryan, president Towles Court Neighborhood	Association, Inc.	
	(Name of Contact Person)	
	(Firm/ Company)	-
1967 Horeize 57 5	ACASTA FL 34236	
	(Address)	
SARAGOTA FL 34236		
	(City/ State and Zip Code)	
E-mail address: (to be used	mail. Com	
For further information concerning this matter, please	call:	262 SE
annom. Bop	, 267 258 1710	5 25 E
(Name of Contact Person) (Area Code) (Daytime Telephone	e Number).
Enclosed is a check for the following amount made pa	syable to the Florida Department of State:	9
\$35 Filing Fee	at 267 258 (710) (Area Code) (Daytime Telephone ayable to the Florida Department of State: S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)	HIZ: 41 SHELFIL
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	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

(Name of Corporation as currently filed with the Florida	Dept. of State)
(Document Num	nber 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	ution: JA
	The new ation" or "incorporated" or the abbreviation "Corp," or "Inc,"
"Company" or "Co," may not be used in the name.	anon or incorporated or the uppreviation Corp. or inc.
B. Enter new principal office address, if applicable:	e)
(Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>1</u>)
<i>~</i> ⊬	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
NA	
D. If amending the registered agent and/or registered of	fice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address: DA	
(D)	City (Zip Code)
New Registered Agent's Signature, if changing Registered liberary accept the appointment as registered agent. I am for	
	Signature of New 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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add	 -	_	
Remove 3 Change Add Remove			
4) Change Add			
Remove			20 21
5) Change Add		-	TALLE 23 JUL
Remove			52 6
6) Change Add			PH 72:
Remove			FAT
E. If amending or additional sheet	ng additio ets, if nece	onal Articles, enter change(s) here: essary). (Be specific)	, ,
Said	150010	enion is orgazied exclasively	for ChariTABLE
executional to	<u>L-5010.</u>	ntidic purposes including the m	naking & AUU distriBUTION
to organizati	200	That guarity do exemptore	anisamous described
udder Sens	n 501	(6)(3) of the I Treewal Rev	seme Code or correspondate
Secrion a A	<u>y</u> 10	That guarity as exemptors (G)(5) of the Interval Rev HUDE federal tax code.	

Upon dissolvation of the Association any association any association are arms
fine) Start be dutie Butied for one or more exempt purposes within
the meaning & Section or (C)(3) of the Internal Revenue Code
tre meaning in Section or 1 (c) (3) of the Internal Revenue Code or corresponding Section of the forward tederal ton code, or should be distributed to the fadural government, or to a STATE or local
distributed to the ledwal and and to the some
COLECTOR TO GO ON ON THE OF TO COL
government, for a public purpose
S 22.
SEE FL
T 2022
The date of each amendment(s) adoption: 1 Jude 2023 , if other than the date this document was signed.
Effective date if applicable: (Juve 2023
(no more than 90 days after amendment file date)
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

Signature

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator of in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Auto M. Boyffl

(Typed or printed name of person signing)

(Title of person signing)

There are no members or members emitted to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.

SECRETATION STATE