## N24098

(Requestor's Name)
(Address)
(Address)
,
(O) (O) A FT (D) (D)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Doddment Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
23%

Office Use Only



200303037602

09/22/17--01087--001 \*\*35.00

17 OCT 23 AM 8: 03
SECRETARY OF STATE
TALLAHASSEE FI GRIDA

Amend.
10126/17

October 19, 2017

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Attn: Ms. Darlene Connell

Subject: M B Towers Homeowners Association, Inc. Ref Number: N24098

Dear Darlene,

Enclosed please find the correct forms that you emailed me to fill out. I only hope I did it correctly. Thank you so much for your help, I really appreciated it. If I made any mistakes, please email me at <a href="mailto:iennifer5286@comcast.net">iennifer5286@comcast.net</a> or call me at (954) 531 6307.

If there is anything else I need to do or send you, please let me know.

Again, thanks. You were such a help to this old lady!

Sincerely,

Betty Gorman

President

M B Towers Homeowners Association, Inc.

RECEIVED 7 MCT 23 B B 2.1



September 25, 2017

BETTY GORMAN M B TOWERS HOMEOWNERS ASSOCIATION, INC. 1972 NE 3 STREET DEERFIELD BEACH, FL 33441

SUBJECT: M B TOWERS HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N24098

We have received your document for M B TOWERS HOMEOWNERS 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):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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.

Letter Number: 017A00019307

Irene Albritton Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation of

MB TOWERS HOMEO	WNERS ASSOCIATION, INC. tly filed with the Florida Dept. of State)
N24099 (Document Number	er of Corporation (if known)
amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1972 N.E. 3rd St.
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	DEERFIELD BEACH,
	FLORIDA 33441
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS ABOVE AS 3
	SS SS SS
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	ce address in Florida, enter the name of the ddress:
Name of New Registered Agent: BE	TTY GORMAN 57 8
_19-	12 N.E. 3rd ST. (Floridu street oddress)
New Registered Office Address:	
DEE	(City) REACH , Florida 3344) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair	Agent: (954) 531-6307 miliar with and accept the obligations of the position.
E	Selly Dorman
	ignature 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         John De           V         Mike Je           SV         Sally Si	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add X Remove	<u>P</u>	JILL THOMPSON (SOLD PROPERTY)	1529 S.W. 8th ST. BOCA RATON, FL. 33486
2) Change Add Remove		DANNY HORKHEIMER (SOLD PROPERTY	7 1529 S.W. 8 <sup>th</sup> ST BOCA RATON, FL 33486
3 ) Change Add Remove		JENNIFER OGBORNE (SOLD PROPERTY)	1529 S.W. 8th ST. BOCA RATON, FL. 33486
4) Change Add Remove	P Ph.	BETTY GORMAN (954) 531-6307	1972 N.E. 3rd St.  DEERFIELD BEACH,  FL. 33441
5) Change Add Remove	<u>Y</u> _	PETER ENGLAND	DEERFIELD BEACH, FL. 33441
6) Change Add Remove	<u>S</u>	AMY SMITH	1976 N.E. 3rd St. DEERFIELD BEACH, FL. 33441
		Page 2 of 4	

E. If amending or adding additional a (attach additional sheets, if necessary	Articles, enter change(s) here:	NONE	
(attach additional sheets, if necessary	y). (Bě specific)	7 40 14-	
<u> </u>	<u>-</u>		
		<u> </u>	. <u>-</u>
	-		
		4,7-0	
		<u> </u>	
		···	
			,
<del>-</del>			

The date of each amendment(s) adoption: Oct. 19, 2017 date this document was signed.	, if other than the
Effective date if applicable: OCT. 19, 2017	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
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 Oct. 19, 2017	
Signature Betty Dorman	
(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)	
BETTY GORMAN (Typed or printed name of person signing)	
PRES(DENT (Title of person signing)	