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TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: 5t. Peters 6	ung High Sc	hool F	ootball Booster Club
DOCUMENT NUMBER: _NO400005	141		
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
Denis Gillen			
	(Name of Contact Per	son)	
St. Petersburg High Sc	hoo!		
) 19	(Firm/ Company)		
2501 5th Av. N.			
	(Address)		
St. Patursburg, FL 33	7/3		
7/	(City/ State and Zip C	ode)	
coach gillen a gmail. c	on		
E-mail address: (to be used	for future annual repo	ort notification	1)
For further information concerning this matter, please	e call:		
Denis Gillm (Name of Contact Person	at	772	370-8072
(Name of Contact Person	(a)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made page	ayable to the Florida D	epartment of	State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ame Divi	et Address endment Secti sion of Corpo Centre of T.	rations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

St Paters Burg High Scho (Name of Corporation as durrently filed with the F	Florida Dept. of State)	·-·
N06000005941		
(Documer	ent Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Profit Corporation adopts th	ne following
A. If amending name, enter the new name of the c	corporation:	
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	"corporation" or "incorporated" or the abbreviation "Corp.	The new "or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	OX)	2020
		- <u>F:</u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the doffice address:	- π ω
	Denis L. Gillen	
<u>New Registered Office Address</u> :	105 Henevies Ave. (Florida street address)	
_	Clearwater Florida 33 (City) (Zip Code)	765
New Registered Agent's Signature, if changing Relative I hereby accept the appointment as registered agent.	egistered Agent: I am familiar with and accept the obligations of the position	
- -	Signature of New Registered Agent, if changing	

and address of each Offi (Attach additional sheets Please note the officer/di P = President; V = Vice I	ficer and/or Directs, if necessary) irector title by the period of the firm of	first letter of the office title: isurer; S= Secretary; D= Director; TR= Tru. Officer. If an officer/director holds more tha	stee; C = Chairman or Clerk; CEO = Chief
Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	aves the corporatio	on, Sally Smith is named the V and S . These sl	PST and Mike Jones is listed as the V. There is hould he noted as John Doe, PT as a Change.
Example: X_Change X_Remove X_Add	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>_P</u>	Dennis Cataldo	
Remove 2) Change Add	T	Bob Musselman	
X Remove	<u>P</u> .	Reid Holden	
4) Change Add	工	Patrick Bateman	
Remove			
5) Change Add			
Remove 6) Change Add			
Remove			
E. If amending or additional she		icles, enter change(s) here: (Be specific)	
Currently	Denais	Cataldo is listed a	There is a change.
1305 Mussa	Iman is	listed as Treasurer	. There is a change.
Dunnis C.	ataldo.	leaves cooperation an	is listed as Treasurer.
15 namec	rousid.	ent 1503 Musse/man	15 listed as I reasurer.

Bob Musselman leaves cooperation and Patrick Bateman

is named as Treasurer
The date of each amendment(s) adoption:, if other than the
date this document was signed.
Effective data if applicables 8/7/20
Effective date if applicable: 8/3/80 (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 cast for the amendment(s) was/were sufficient for approval.

Signature (By the chairman of 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) (Typed or printed name of person signing)	Dated	poard of directors. $\frac{7/27/2020}{\sqrt{27/2020}}$
President	Signatu	(By the chairman of 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
		William Read Holden (Typed or printed name of person signing)
		President (Title of person signing)