134424

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(Address)	
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Amend

OCT 31 2016 I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO		nts and Booster Associ	ation, Inc		
	734624				
DOCUMENT NUMBER:			<u> </u>		
The enclosed Articles of Am	endment and fee are subm	itted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
Devon P Donaldson					
	(Name of Contact Perso	on)		
		(Firm/ Company)			
120 South Anoka Ave\		(
		(Address)			
Avon Park, FL 33825					
	(City/ State and Zip Coo	de)		
dpd@geodevinc.net					
E	-mail address: (to be used	for future annual report	notification	1)	
For further information conc	erning this matter, please c	all:			
Devon P Donaldson		80 at	63	453-2335	
	(Name of Contact Person)		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida Dep	artment of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee Teate of Status Tied Copy Ttional Copy is Tosed)	
Mailing A Amendme	······································		t Address dment Sect	ion	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 20, 2016

DEVON P. DONALDSON 120 SOUTH ANOKA AVE AVON PARK, FL 33825

SUBJECT: AVON PARK BAND PARENTS AND BOOSTER ASSOCIATION,

INC.

Ref. Number: 734624

We have received your document for AVON PARK BAND PARENTS AND BOOSTER 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):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

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: 116A00022564



Articles of Amendment , to Articles of Incorporation of

Avon Park Band Parents and Booster Association, Inc.

(Name of Corporation as currently for 734624

(Name of Corporation as curre	ently filed with the Florida	Dept. of State)		
734624				
(Document Num	ber of Corporation (if know	vn)		
Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For P</i>	rofit Corporation ad	opts the fo	llowing
A. If amending name, enter the new name of the corpora	ation:			
NA			7	The new
name must be distinguishable and contain the word "corpor 'Company" or "Co." may not be used in the name.	ration" or "incorporated" o	or the abbreviation "		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	NA S)		<u>-</u>	
<u> </u>				
				- FEST
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA		265 E.S.	0.916
(mining united states and states			571	$\frac{\Box}{\omega}$
			: 1	
	100 to 10			-
 If amending the registered agent and/or registered of new registered agent and/or the new registered of fice 		ter the name of the		5:
Name of New Registered Agent: NA			311 21	
	(Floru	la street address)		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:				
		, Florida (Zip C		
	(Ciţv)	(Zip C	(ode)	
New Registered Agent's Signature, if changing Registered thereby accept the appointment as registered agent. I am		e obligations of the p	osition.	
	Signature of New Registere	ed 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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add X Remove	Sec	Ramnarain, Ahylia	
2) Change	Sec	Pressley, Danielle	700 East Main St
<u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </u>			Avon Park, F1, 33825
Remove			
3) Change			
Add			
Remove			
4) Change			**************************************
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
(attach additional sheets, if necessary).	(Be specific)	•		
NA				
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And the second s				
Mary Andrews Control of the Control				

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	e date of each amendment this document was signed	• • • • • • • • • • • • • • • • • • • •	, if other than the
Eff	ective date <u>if applicable</u> :	10/14/2016	
		(no more than 90 days after amendment file date)	
		is block does not meet the applicable statutory filing requirements, the Department of State's records.	his date will not be listed as the
Add	option of Amendment(s)	(CHECK ONE)	
=	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amproval.	endment(s)
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) virectors.	.vas/were
	10/14 Dated	2016	
		chairman or vice chairman of the board, president or other officer-if	
		of been selected, by an incorporator — if in the hands of a receiver, treourt appointed fiduciary by that fiduciary)	ustee, or
		HICOLIE SCHL	-SS/-
		(Typed or printed name of person signing)	
		PROIDUR	-/htere
		(Title of person signing)	