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12 JUL 23 PN 3: 25

7/23/12 RW Arrend ALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations		
NAME OF CORPORATION: Countryside	High School D	rama Booster Club, Inc.
DOCUMENT NUMBER: NO10000	04891	
The enclosed Articles of Amendment and fee are sub	miunt Con Ction	
·	ŭ	
Please return all correspondence concerning this matt	er to the following:	
Ana M. Herron		
· .	(Name of Contact Perso	on)
	(Firm/ Company)	
1221 Willowick Circle	9	
	(Address)	
Safety Harbor, FL 34	695	
	(City/ State and Zip Coo	le)
aherron1@tam	pabav.rr.d	com
E-mail address: (to be used		
For further information concerning this matter, please	cutt:	
Ana M. Herron	_a ,727	347-1120 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yuble to the Florida Depa	artment of State:
S35 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mulling Address Amendment Section		Address
Division of Corporations		ment Section n of Corporations

P.O. Box 6327
Tallalassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Articles of Amendment to Articles of Incorporation

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12 JUL 23 PM 3: 25

Countryside High So	hool Dram	ia Booster C	Club, Inc.	
(Name of Corporation as current	lly filed with the Fi	orida Dept. of State)		•
N01000004891				
(Docume	nt Number of Corpor	ration (if known)		
Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorpora	1006, Florida Statul tion:	es, this <i>Florida Not Fo</i>	r Profit Corporation adopts the	following
A. If amending name, enter the new no N/A	ime of the corporat	<u>lon:</u>	·	The new
name must be distinguishable and contain	the word "corpora	tion" or "incorporated	" or the abbreviation "Corp." o	
"Company" or "Co." may not be used in B. Enter new principal office address,	lf applicable:	N/A		
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS) <u></u>		
C. Enter new malling address, if appil (Malling address MAY BE A POST of	<u>cable:</u> <u>OFFIÇE BOX</u>)	N/A		
D. If amouding the registered agent an new registered agent and/or the new	d/or registered office a	<u>e address in Florida.</u> ddress:	enter the name of the	
Name of New Registered Agent:	Ana M. He			
	1221 Willo	owick Cir.		
New Registered Office Address:	((Florida street address)		
	Safety Ha	rbor	, Florida 34695	
	(City)		(Zip Code)	
New Registered Agent's Signature, if ch	anging Registered .	Agent:		
hereby accept the appointment as registe	red agent. I am fan	nitiar with and accept to	he obligations of the position.	
Sign	where of New Regist	ered Agent, if changing		
	l n	man Laf d		

Page 1 of 4

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	<u>V</u> <u>Mi</u>	m <u>Doc</u> k <u>e Jones</u> ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	T	Ana M. Herron	1221 Willowick Circle Safety Harbor, FL 34695
2) Change Add Remove 3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove	***************************************		
Change Add Remove			

1/A		•				
I/A						
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T'he	date of each amendment	(s) adoption: 7/18/12	
	etive date <u>if applicable</u> :	7/18/12	
	IL REPRESENTE.	(no more than 90 days after amendment file dute)	
Ado	ption 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 amendment(s) proval.	
	There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	Dated 7/1	8/12	
	Signature	havon Van I	
	(By the have n	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator — if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	
	Sharo	n Vaal	
		(Typed or printed name of person signing)	
	Presid	ent	
		(Title of nercon signing)	