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Certified Copies	Certificates	of Status
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FILED
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SECRETARY OF STATE

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#### **COVER LETTER**

TO: Amendment S Division of C		.,	
	ST. JAGO	HIGH SCHOOL	Kernesi
NAME OF CORPO	DRATION: ASSOCIATION	HIGH SCHOOL ON OF SOUTH FI	LORIDA, INC.
DOCUMENT NUM	MBER: NOLOOC	0006067	
The enclosed Article	es of Amendment and fee are sub	mitted for filing.	
Please return all cor	respondence concerning this matt	er to the following:	
	ELvin h	Contact Person)	
<del></del>	(Name of	Contact Person)	<del></del>
	(Firm	/ Company)	
	3109 Ju	WIPER LANE Address)	
	(A	Address)	
<del></del>	Davie F	L 33330	
	(Cfty/ Stat	e and Zip Code)	
	E-mail address: (to be used	e yahoo. com	ion)
For further informat	ion concerning this matter, please		,
			<b></b>
(Nam	WILLIAMS e of Contact Person)	at (954) 913 - (Area Code & Daytim	e Telephone Number)
Enclosed is a check		ayable to the Florida Department	
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center	ns

Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 19, 2009

ELVIN WILLIAMS 3109 JUNIPER LANE DAVIE, FL 33330

SUBJECT: ST. JAGO HIGH SCHOOL ALUMNI ASSOCIATION OF SOUTH

FLORIDA, INC.

Ref. Number: N0100006067

We have received your document for ST. JAGO HIGH SCHOOL ALUMNI ASSOCIATION OF SOUTH FLORIDA, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 109A00028100

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#### **Articles of Amendment**

## to Articles of Incorporation

SI. JAGO HIGH SCI			7/1/10/	
OF SOUTH FLORID	AIN			
(Name of Corporation as curre	ntly filed with t	he Florida Dept. of Star	<u>te</u> )	
Moloo	00060	67		
(Document Num			<del></del>	
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In		this Florida Not For Pr	ofit Corporation ad	opts .
A. If amending name, enter the new name of	the corporation	<u>1:</u>		
ST. JAGO ALLIMAI A		<del></del>	DIN TO	C,
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" of	ontain the word	"corporation" or "inco	rporated" or the	<b>-</b> ,
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>			<del></del> ,	
			7	
,			AS S	
C. Enter new mailing address, if applicable:	<b>:</b>		AUG CRET LAHA	
(Mailing address MAY BE A POST OFFIC			ASIA 3	
			E O Y	П
			OF S	
	r	··········	97 8: 57 8: 57 5: 57 5:	
D. If amending the registered agent and/or r			er the name of the	
new registered agent and/or the new regis	tered office add	lress:		
Name of New Registered Agent:			_	
New Registered Office Address:	(Florid	da street address)	-	
			_, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changin	on Degistered A.			
I hereby accept the appointment as registered position.	agent. I am j	gent: familiar with and accep	t the obligations of	<sup>r</sup> the
S	ignature of New	Registered Agent, if char	nging	

### 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
<u> </u>			
<del></del> ,			☐ Add ☐ Remove
E. If ame	nding or adding additional A additional sheets, if necessary,	rticles, enter change(s) here:  (Be specific)	
<del></del>			
		_	
	•		
1		_	
	W		

The date of each amendment(s) adoption:	B-12-2009
·	(date of adoption is required)
Effective date <u>if applicable</u> :	nore than 90 days after amendment file date)
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)
There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The amendment(s) was/were
Dated 8-28	-2009
Signature Eliu	a willias
have not been sel	or vice chairman of the board, president or other officer-if directors lected, by an incorporator — if in the hands of a receiver, trustee, onted fiduciary by that fiduciary)
	in Williams
•	(Typed or printed name of person signing)
····	TREASURER
<del></del>	(Title of person signing)

Page 3 of 3