## NO 100000 72 41

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## COVER LETTER

TO: Amendment Section Division of Corporations				_	
NAME OF CORPORATIO	. Country	Day	Schools	PTSA I	nc.
DOCUMENT VIMBER	N010000	072	\ \{\		

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

reasurer a country day largo. com
E-mail address: (to be used for future annual report politication)

For further information concerning this matter, please call:

727-410-9012

(Area Code) (Daytime Telephone Number) VICTURIA HENSON
(Name of Contact Person)

Enclosed is a check for the following amount made payable to the Florida Department of State:

Certificate of Status

Certified Copy (Additional copy is

Certificate of Status Certified Copy (Additional Copy is enclosed) Enclosed)

**Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

□\$52.50 Filing Fee

Articles of Amendment to	1 CT 19 14 16
Articles of Incorporation	
Muntry Day Schools PTSA Inc.	ھ
Country Day Schools PISA IR.	マ
(Name of Corporation & currently filed with the Florida Dept. of State)	₹
(Document Number of Corporation (if known)	(
ursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following mendment(s) to its Articles of Incorporation:	
. If amending name, enter the new name of the corporation:	
The new	
1\1C1  name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."	
"Company" or "Co." may not be used in the name  \(\sigma\) \(\sigma\)	
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)	
Principus Office address and the second seco	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address:	
Name of New Registered Agent: VICTORIA HENSON	
11499 131 St N. Largo Fl	33774
New Registered Office Address:	
<b>ν/</b> α, Florida	
(Cip) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Netoria deugen	_
Signature of New Registered . sent, if changing	-

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	PT John Do V Mike Jo SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DP	Goodrich, Tonya	11499 131 St St N Largo FL 33774
Remove  2) Change Add	DP	Jackson, Chris	11499 131 st St N Largo FL 33774
Remove 3) Change Add	<u>T</u>	Torok, Mary Therese	11499 131st St N Largo, FL 33774
Remove  4) Change  Add	<u>T</u>	Henson, Victoria	11499 1315t St N Largo, FL 33774
Remove  5) Change  Add  Remove	·····		
6) Change Add Remove	<del></del>		
		Page 2 of 4	

	the ages change(s) here:
. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
	n/a

Page 3 of 4

	<b>_</b> 0	(ficer Changes
The date of each amendment(s) adoption: date this document was signed.	October 1. 2017 70	, if other than the
Effective date if applicable:	October 1, 2017  more than 90 days after amendment file do	nte)
Note: If the date inserted in this block does not document's effective date on the Department of	meet the applicable statutory filing requir	
Adoption of Amendment(s) (CH	IECK ONE)	
The amendment(s) was/were adopted by th was/were sufficient for approval.	te members and the number of votes cast for	or the amendment(s)
There are no members or members entitled adopted by the board of directors.	I to vote on the amendment(s). The amend	ment(s) was/were
Dated October 15.		
Signature	ua Helipu	
have not been selected,	e chairman of the board, president or other by an incorporator – if in the hands of a re iduciary by that fiduciary)	
Vict	oria Henson	
<del></del>	(Typed or printed name of person signi	ng)
tre	easuter	
	(Title of person signing)	