

N 02000009902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

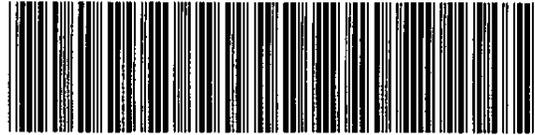
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Amend
Trevi
11-10-08*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Leon High Cheerleaders Assoc., Inc.

DOCUMENT NUMBER: NO2000009902

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

Please return all correspondence concerning this matter to the following:

DEORA A. O'NEAL
(Name of Contact Person)

Leon High Cheerleaders Association, Inc.
(Firm/ Company)

4305 Calcutta Court
(Address)

Tallahassee, FL 32303
(City/ State and Zip Code)

For further information concerning this matter, please call:

DEORA A. O'NEAL at (850) 284-6317
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

- \$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)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 6, 2008

DEDRA O'NEAL
LEON HIGH CHEERLEADERS ASSOCIATION, INC.
4305 CALCUTTA CT
TALLAHASSEE, FL 32303

SUBJECT: LEON HIGH CHEERLEADERS ASSOCIATION, INC.
Ref. Number: N02000009902

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2008 NOV 10 PM 1:21
NOT ATTACHED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

We have received your document for LEON HIGH CHEERLEADERS ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

As discussed by phone this morning, I am attaching the correct form for you to complete to remove an officer from your corporation.

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) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 708A00056388

Articles of Amendment
to
Articles of Incorporation
of

Leon High Cheerleaders Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

702000009902

(Document Number of Corporation (if known))

FILED
2008 NOV 10 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new 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.

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

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 agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida

(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.

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
SEVP DEVP	Michelle Comas	1537 US Highway Tall, FL 32378	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

Amend to correct the spelling of
 the DP's name to read as
 DEDRA D'NEAL.

The date of each amendment(s) adoption: September 29, 2008

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated November 10, 2008

Signature Dedra B. A. O'Neal

(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)

Dedra B. A. O'Neal
(Typed or printed name of person signing)

Director/President
(Title of person signing)