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(Re	equestor's Name)	
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Amand C.COULLIETTE SEP 1 0 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Monarch Knig	hts Football Booster Cl	ub, Inc.
DOCUMENT NUM	BER: N03000008328		
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Joanne	e F. Abatecola	
	(Name o	f Contact Person)	
	(Firm	n/ Company)	
		IW 51st Court	···
	(Address)	
		Creek, FL 33073 ate and Zip Code)	<u>_</u>
		n@bellsouth.net	ation)
For further information	on concerning this matter, pleas	se call:	
Joanne F. Abated		at (23
,	of Contact Person)	Area Code & Daytii) payable to the Florida Departmen	
\$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)
	ing Address Indment Section	Street Address	ŕ
	ion of Corporations	Amendment Section Division of Corporation	ons
	Box 6327	Clifton Building	
	hassee, FL 32314	2661 Executive Cente	r Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Monarch Knights Football Booster Club, Inc.

(Name of Corporation as currently filed	with the Florida Dept. of Stat	<u>e</u>)
N03000008	328	
(Document Number of Co		
Pursuant to the provisions of section 617.1006, Florida St the following amendment(s) to its Articles of Incorporation		ofit Corporation adopts
A. If amending name, enter the new name of the corp	oration:	
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." "Company" or "Co." m	word "corporation" or "incomay not be used in the name.	rporated" or the
B. Enter new principal office address, if applicable:		Ž.
(Principal office address MUST BE A STREET ADDRI	ESS)	- B 8
		SEP -
		A Comment
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(THE RESERVE OF THE PERSON OF T
D. If amending the registered agent and/or registered		r the name of the
new registered agent and/or the new registered offi	ice address:	
Name of New Registered Agent:	•	
New Registered Office Address:	(Florida street address)	-
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. position.		the obligations of the
Signature o	of New Registered Agent, if chan	ging

<u>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:</u> (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	Darren Logozzo	3996 Crescent Creek Place Coconut Creek, FL 33073	□ Add ☑ Remove
TREA	Joseph Monastra	P.O. Box 970633 Coconut Creek, FL 33073	☐ Add ☑ Remove
TREA	Joseph Vandervoot	P.O. Box 970633 Coconut Creek, FL 33073	_ ☑ Add _ □ Remove
E. If amend	ling or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: specific)	
<u>. </u>			
	· · · · · · · · · · · · · · · · · · ·		

The date of each amendme	ent(s) adoption: August 10, 2009
	(date of adoption is required)
Effective date if applicable	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.
There are no members of adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were directors.
{Dated} Au	gust 25, 2009
Signature	1 amount Thomas
h	By the chairman or vice chairman of the board, president or other officer-if director ave not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)
	Tammie Thomas
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)