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## **COVER LETTER**

**TQ:** Amendment Section Division of Corporations

NAME OF CORPORATION		TARY SCHOOL PAI	RENT TEACI	HER ORGANIZATION, INC.
DOCUMENT NUMBER:	N04000004568			
The enclosed Articles of Am	endment and fee are sub	mitted for filing.		
Please return all corresponde	nce concerning this matt	er to the following:		
Casey Laurienzo				
		(Name of Contact Pe	rson)	
SEALEY ELEMENTARY S	SCHOOL PARENT TEA	CHER ORGANIZAT	TION, INC.	
	_	(Firm/ Company	′)	
3219 Del Rio Ter				
		(Address)		
Tallahassee, FL 32312				
•		(City/ State and Zip (	Code)	
claurienzo@gmail.com				
E	-mail address: (to be used	for future annual rep	ort notificatio	n)
For further information cone	erning this matter, please	e call:		
Casey Laurienzo		at	847	9753245
	Name of Contact Person	i)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made p	ayable to the Florida I	Department of	State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	s Certif	ied Copy tional Copy is
P.O. Box 6	nt Section Corporations	An Div Th	eet Address nendment Sect vision of Corpo e Centre of T 15 N. Monro	orations

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

N 0400000456				
(Document Nur	nber of Corporation (if known	own)		
Pursuant to the provisions of section 617.1006. Florida Statumendment(s) to its Articles of Incorporation:		Profit Corporation adopts the following		
A. If amending name, enter the new name of the corpor	<u>'ation:</u>			
		The new		
ame must be distinguishable and contain the word "corpo Company" or "Co." may not be used in the name.	ration" or "incorporated"	or the abbreviation "Corp," or "Inc."		
B. Enter new principal office address, if applicable:	<u> </u>	- <del> </del>		
Principal office address <u>MUST BE A STREET ADDRES</u>	<u></u>	EP 20 PH		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	-	# 2:50		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent:		nter the name of the		
Name of the registered rigent.		· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:	(Flor	ida street address)		
<u></u>		, Florida		
	(City)	, Florida (City) (Zip Code)		
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am		ie obligations of the position.		

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>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Khange Add	<u>P</u>	Casey Laurienzo	2815 Allen Rd Tallahassee, FZ 32312
Remove  2) Change Add		Alyssa Martin	2815 Allen Pd Tallahassee, FL 323/2
Remove Change Add Remove	P	Christing westy	1815 Allen Rd. Tallahassee, FL 32312
4) Change Add		Tian owens	7815 Allen Rd. Tallahassee, EL
Remove  5)ChangeAddRemove			<u> </u>
6) Change Add			
E. If amending or add (attach additional sho		rticles, enter change(s) here: . (Be specific)	

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The date of each amendment(s) adoption: _ date this document was signed.	April	18,202	4	if othe	r than the
Effective date if applicable:	.) 60.1	rs after amendment f	S		
<u>Note:</u> If the date inserted in this block does not document's effective date on the Department of	ot meet the applic of State's records	able statutory filing	requirements, this	s date will not be listed.	as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

☐ 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 Signature (By the chairman or vige 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) Casey Laurien 20
(Typed or printed name of person signing) Wi President
(Title of person signing)