

N04060005535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

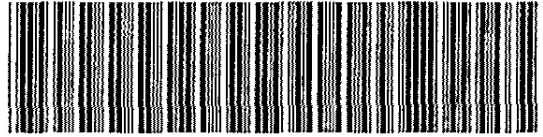
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800045701668

FILED  
05 FEB - 1 PM 2:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12/10/2005 10:00:00 AM

2C  
2/13/05

**COVER LETTER**

**TO: Amendment Section  
Division of Corporations**

**NAME OF CORPORATION:** Greater Orlando Affiliate of Black School  
Educators, Inc  
**DOCUMENT NUMBER:** NO4000005535

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

Please return all correspondence concerning this matter to the following:

Dr. Florence Alexander  
(Name of Contact Person)

Greater Orlando Alliance of Black School Educators, Inc  
(Firm/ Company)

P.O. Box 915115  
(Address)

Longwood, FL 32791  
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Vicki Brooks at 407-317-3200 x 2855  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$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  
409 E. Gaines Street  
Tallahassee, FL 32399



The date of adoption of the amendment(s) was: January 13, 2005

Effective date if applicable: January 13, 2005  
(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 was sufficient for approval.
- There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 28 day of January, 2005.

Signature Dr. Florence Alexander  
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Dr. Florence Alexander  
(Typed or printed name of person signing)

Founder, Member of Board of Directors, Officer  
(Title of person signing)

**FILING FEE: \$35**