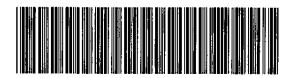
N05000001151

(Re	questor's Name))	
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SCORETARY OF SWILL DIVISION OF CORPORATION

C.L.3/15

COVER*LETTER ∖

Division of Corporations Coral Glades Band & Color Guard Booster Association, Inc. NAME OF CORPORATION: N05000001151 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lisa Klitz (Name of Contact Person) Coral Glades High School Music Association, Inc. (Firm/Company) 2700 Sportsplex Drive (Address) Coral Springs, FL 33065 (City/ State and Zip Code) cghsma@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Lisa Klitz

TO: Amendment Section

(Name of Contact Person)

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

■ \$35 Filing Fee

□\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status

Certified Copy

enclosed)

(Additional copy is

□\$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

Articles of Amendment to Articles of Incorporation

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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vn)
vn)
t For Profit Corporation adopts the following
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rated" or the abbreviation "Corp." or "Inc."

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2)
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Mari Ja
, Florida

Page 1 of 4

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)

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>V</u> <u>Mik</u>	n Doe te Jones y Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
l)Change			· · · · · · · · · · · · · · · · · · ·		
Add					
Remove					
2)Change					
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6)Change		-			
Add					
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E.	E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
	(attach additional sheets, if necessary).	(Be specific)			
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The date of each amendment(s) add	option:		sil other than the
date this document was signed.		SECRETARY DIVISION OF CO	OF STATE IRPORATIONS
Effective date if applicable:		DIAI2164 of a	
<u></u>	(no more than 90 days after amendment file date)	15 APR -9	AM 8: 27
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adwas/were sufficient for approva	opted by the members and the number of votes cast for the a l.	mendment(s)	
☐ There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were	
Dated 04/01/2	2015		
Signature	a a. Klip		_
have not bee	man or vice chairman of the board, president or other officer in selected, by an incorporator – if in the hands of a receiver, ppointed fiduciary by that fiduciary)		
Lisa A Klitz	2		
	(Typed or printed name of person signing)		
Treasurer			
	(Title of person signing)		