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(Req	juestor's Name)	
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(City)	/State/Zip/Phone #)	_
PICK-UP	WAIT MAIL	
(Bus	iness Entity Name)	_
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Certified Copies	Certificates of Status	_
Special Instructions to F	iling Officer:	





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ECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ALVA B	and Boosters,	Inc.
DOCUMENT NUMBER: <u>N 0 80000</u>	07861	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Jeff Tue (Name of	Contact Person)	············
Tuscan 3(Ompany, PF	
12021 World P	1020 LCINE BL	<u>cig55</u>
FOr+ Myers, F (City/ State	1 33907 te and Zip Code)	
For further information concerning this matter, p	lease call:	
JEFFTUS (On (Name of Contact Person)	at (<u>239</u>) <u>333-</u> (Area Code & Daytime Te	lephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida Depar	tment of State:
\$35 Filing Fee \$\sum \text{\$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 Tallabassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building	A

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

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<u>Alva Bano</u>	1 Boosters, Inc.	
(Name of Corporation as cu	urrently filed with the Florida Dept. of State)	
<u> </u>	007861	
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 617.100 the following amendment(s) to its Articles of	006, Florida Statutes, this Florida Not For Profit Corpor of Incorporation:	ration adopts
A. If amending name, enter the new name	·	
A. If amending hame, enter the new hame	e of the corporation.	
The new name must be distinguishable and abbreviation "Corp." or "Inc." <u>"Company</u>	d contain the word "corporation" or "incorporated" y" or "Co." may not be used in the name.	or the
B. Enter new principal office address, if a	applicable:	
(Principal office address <u>MUST BE A STRI</u>	REET ADDRESS)	
		<u>-</u> C
	<u> </u>	
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)		
	-	
		<u>⊰m</u> ω
D. <u>If amending the registered agent and/o</u> new registered agent and/or the new re	or registered office address in Florida, enter the nam registered office address:	e of the
Name of New Registered Agent:		
	21219 North River R	oact.
New Registered Office Address:	(Florida street address)	22.00
	HIVA , Florida_	
	(City) (Zip C	oae)
New Registered Agent's Signature, if chan I hereby accept the appointment as registe position.	nging Registered Agent: ered agent. I am familiar with and accept the oblig	cations of the
-	Signature of New Registered Agent, if changing	

,	101	- 0
The date of each amendment	11/	09
Effective date if applicable:	EHRLTIVE	ImmibiATSly
	(no more than 90 days after an	nendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we was/were sufficient for app.		he number of votes cast for the amendment(s)
There are no members or radopted by the board of dir		mendment(s). The amendment(s) was/were
Dated	3.10.09	<u> </u>
Signature 🗹	Shell S- Haws	٠.
hav		The board, president or other officer-if directors porator — if in the hands of a receiver, trustee, or nat fiduciary)
	(Typed of printed r	name of person signing)
	V President (Title of pers	son signing)

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>	Name		Address	Type of Action
<u>PD</u>	Shelly S. Harvi	CY	21219 N. River Rol. Alva, Fl 33920	Add Remove
<u>VPD</u>	Colleen M. Far	nan	21219 N. River Rd Alva, Fl 33920	· 🖸 Add
SD	Teresa M. Cauc	Hik	21219 N. River R AIVa, FI 33920	Add Remove
	ding or adding additional Articles, additional sheets, if necessary). (Be	enter cl		
PD I	michele A. (c	her	7 - Remove) -
VIPO	Rose Conner		- Remove	
50	Charles R. Flo	n I	- Remove	
	Charles hir vo	' 		
TD. F	Becky. Tusco	${2}$	- ADD	
2121	19 N. River Ro	•	AIVA FI 22	920
<u> </u>	() () () PAC	<u>-1·</u>	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Art	icle III			
The	Specific purp	05	for which	1+nis
(orpo	ration is orga	<u>ani</u>	zed is: Ac	nantable
Drac	anization e	stc	ablished.	
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TOF	fundraise, 6	UP	port and e	nnance
the	Alva Band 1 Idle School,	500	aram at	AIVa
Mic	Idle School	α	PUDIC SC	nool
1,,,0		<u> </u>		