## ND900000 4199

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DIVISION OF CORPORATIONS

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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Deane Bozeman School Parent Teacher Organization, Inc. NAME OF CORPORATION: N09000004199 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michelle Broadway (Name of Contact Person) Deane Bozeman School PTO (Firm/ Company) P.O. Box 8494 (Address) Southport, FL 32409 (City/ State and Zip Code) kooneybroadway@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michelle Broadway (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 & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** 

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Deane Bozeman School	Parent Teacher Organ	ization, Inc.	<i>J</i> .
(Name of Corporation as currently	y filed with the Florida Dept. of Stat	<u>e</u> )	
N09000004199			
(Document	Number of Corporation (if known)		
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporation		For Profit Corporation adopts the following	lowing
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and contain "Company" or "Co." may not be used in			he new "Inc."
B. Enter new principal office address, i (Principal office address MUST BE A ST			
C. Enter new mailing address, if application (Mailing address MAY BE A POST O			
D. If amending the registered agent and new registered agent and/or the new		da, enter the name of the	
Name of New Registered Agent:	Michelle Broadway		
	318 Tates Lane		
New Registered Office Address:	(Florida street address,		
	Southport	, Florida 32409	
·	(City)	(Zip Code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe  Sign			

Page 1 of 4

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:

 $P = President; \ V = \ Vice \ President; \ T = \ Treasurer; \ S = \ Secretary; \ D = \ Director; \ TR = \ Trustee; \ C = \ Chairman \ or \ Clerk; \ CEO = \ Chief \ Executive \ Officer; \ CFO = \ Chief \ Financial \ Officer. \ If \ an \ officer/director \ holds \ more \ than \ one \ title, \ list \ the \ first \ letter \ of \ each \ officer \ held. \ President, \ Treasurer, \ Director \ would \ be \ PTD.$ 

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Р	Galbreath, Stacie	13920 Ashton Way
Add			Panama City, FL 32409
X Remove			
2) X Change	P	Broadway, Michelle	318 Tates Lane
Add			Southport, FL 32409
Remove 3) Change	<u>V</u>	Houwers, Jessica	12800 Merial Greensward Path
X Add			Southport, FL 32409
Remove 4) Change	T	Swearington, Tammi	2601 E HWY 20
Add X Remove			Panama City, FL 32409
5) Change	T	Santoru, Misti	624 Fitness Rd
$X_{Add}$			Southport, FL 32409
Remove			
6) Change Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
(attach additional sneets, if necessary). (Be specific)					
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The date of each amendme	nt(s) adoption: 06/04/2013
Effective date <u>if applicable</u> :	06/04/2013
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.
There are no members of adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were f directors.
Dated <u>Lo</u>	-4-2013
Signature	richelle Broadway
have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or recourt appointed fiduciary by that fiduciary)
Miche	lle Broadway
<del></del>	(Typed or printed name of person signing)
Presid	ent
<del></del>	(Title of person signing)