## N09000004199

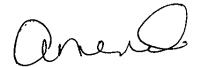
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Deane Bozen NAME OF CORPORATION:	nan School Parent	Teacher Organization, Inc.
DOCUMENT NUMBER: NO900004	4199	
The enclosed Articles of Amendment and fee are sub	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Misti Santoru		
	(Name of Contact Person	n)
Deane Bozeman Schoo	I PTO	
	(Firm/ Company)	
P.O. Box 8494		
	(Address)	
Southport, FL 32409		
	(City/ State and Zip Cod	e)
mistimtnhop@gn		
E-mail address: (to be use	ed for future annual report	notification)
For further information concerning this matter, please	e call:	
Misti Santoru	at (850	, 913-3285
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee  \$43.75 Filing Fee & Certificate of Status	* 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	Amend Division Cliftor	Address Iment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

Articles of Incorporation

FILED

Florida

(Zip Code)

Deane Bozeman School Parent Teacher Organization Կոշ. PM Կ։ ۱6 CEUME - AY OF STATE TALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) N09000004199 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co," may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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 office held. President, Treasurer, Director would be <math>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 <u>Doe</u> te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	P	Broadway, Michelle	318 Tates Lane
Add			South-port, FL 32409
X Remove			<del></del>
2) Change	<u>P</u>	Shurrum, Jennifer	630 Brit Pond Rd
X Add			South-port, FL 32409
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del></del>	
Add			
Remove			
6)Change			
Add			
Remove			

E. 'If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
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	,, <u>,</u>
•	

	date of each amendment		, if other than the
	ate this document was signed.  Iffective date if applicable: 11/19/2013		
		(no more than 90 days after amendment file date)	
<b>Ad</b> c	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	Dated <u>il-</u>	19-2013	
	Signature M	Rist Santon	
	(By the	e 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 court appointed fiduciary by that fiduciary)	_
	Misti S	antoru	
		(Typed or printed name of person signing)	
	Treasu	rer	
		(Title of person signing)	