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SECRETARY OF STATE ALLAHASSEE, FLORID,

Amend

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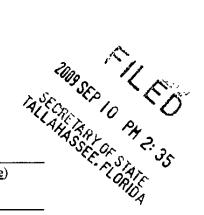
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ALLSTAR CH	IEER BOOSTER CLUB,	INC.
DOCUMENT NUM	IBER: N09000004936	·	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
warned did follows		elinda Weir	
	(Name o	f Contact Person)	
	(Firm	n/ Company)	
	5460 Cinn	namon Fern Blvd.	
	(Address)	
		a, FL 32927	
	(City/ Sta	ate and Zip Code)	
		nom@aol.com ed for future annual report notificati	on)
For further information	on concerning this matter, pleas	e call:	
Melinda Weir		at (321) 626-8983	
(Name	of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Department of	of State:
□\$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)
Amer Divis P.O. I	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



ALLSTAR CHEER BOOSTER CLUB, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N09000004936

(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:

The new name must be distinguishable and con abbreviation "Corp." or "Inc." <u>"Company" or</u>			orporated" or the
3. Enter new principal office address, if appli-			ern Blvd.
Principal office address <u>MUST BE A STREET</u>	(ADDRESS)	Cocoa, FL 32927	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX</u>)	5460 Cinnamon Fe	rn Blvd.
		Cocoa, FL 32927	
			ter the name of the
new registered agent and/or the new register	ered office ad		ter the name of the
	ered office ad M	dress: elinda Weir	ter the name of the
new registered agent and/or the new register	ered office ad M 5460 Cin	dress:	ter the name of the
new registered agent and/or the new register Name of New Registered Agent:	ered office ad M 5460 Cin	dress: elinda Weir namon Fern Blvd.	
new registered agent and/or the new register Name of New Registered Agent:	ered office ad M 5460 Cin	dress: elinda Weir namon Fern Blvd. ida street address)	ter the name of the , Florida 32927 (Zip Code)
Name of New Registered Agent:	ered office ad M 5460 Cin (Flor	elinda Weir namon Fern Blvd. ida street address) Cocoa (City)	 , Florida <mark>32927</mark> (Zip Code)

Page 1 of 3

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>	<u>Name</u>	<u>Address</u>	Type of Action
<u>P</u>	JAQUES, SHANNON N	7160 CARILLON AVE COCOA, FL 32927	☐ Add ☑ Remove
<u>VP</u>	TILLMAN, APRIL M	2605 COLUMBIA BLVD. APT. 502 TITUSVILLE, FL 32780	☐ Add ☐ ☑ Remove
E. If amer (attach d	iding or adding additional Articles, en additional sheets, if necessary). (Be sp	ter change(s) here: vecific)	
	re vivo vivo dest ^o		
			

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)

Title	Name	Address	Type of Action
<u>P</u>	THOMPSON, TERESA L	5165 MELODY ST COCOA, FL 32927	☑ Add □ Remove
<u>VP</u>	WILLIAMS, DAWN L	838 WESTPORT DRIVE ROCKLEDGE, FL 32955	☑ Add ☐ Remove
<u>T</u>	MELINDA WEIR	5460 CINNAMON FERN BLVD COCOA, FL 32927	
	g or adding additional Articles, enter clional sheets, if necessary). (Be specific		
-			

The date of each amendmen	t(s) adoption: <u>09/0//09</u>
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were irectors.
Dated	09/01/09
Signature	· . · /· · · · · · · · · · · · · · · · ·
ha	y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator — if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	TERESA L THOMPSON
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)