

NO9000007438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

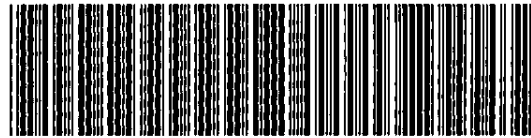
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11/18/10--01019--025 \*\*35.00

*Amend*

FILED  
10 DEC 13 AM 9:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Roberts DEC 13 2010



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 8, 2010

CARMEN PRATT-WILLIAMS  
MIAMI BEACH HI-TIDE ALUMNI(2ND MAILING)  
13117 SW 49TH STREET  
MIRAMAR, FL 33027

SUBJECT: MIAMI BEACH HI TIDE ALUMNI ASSOCIATION, INC.  
Ref. Number: N09000007438

We have received your document for MIAMI BEACH HI TIDE ALUMNI ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 3 of your document is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

*If you have any questions concerning the filing of your document, please call (850) 245-6892.*

Tina Roberts  
Regulatory Specialist II

Letter Number: 510A00027485

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: **MIAMI BEACH HI-TIDE ALUMNI**

DOCUMENT NUMBER: **N09000007438**

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**CARMEN PRATT-WILLIAMS**

(Name of Contact Person)

**MIAMI BEACH HI-TIDE ALUMNI**

(Firm/ Company)

**13117 SW 49TH STREET**

(Address)

**MIRAMAR, FL 33027**

(City/ State and Zip Code)

**CWill23189@aol.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**CARMEN PRATT-WILLIAMS**

(Name of Contact Person)

at ( **305** ) **498-7334**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

**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  
of

**MIAMI BEACH HI-TIDE ALUMNI ASSOCIATION, INC.**

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

**NO9000007438**

(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:**

**N/A**

*The new 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**)

**N/A**

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

**N/A**

**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:

**N/A**

New Registered Office Address:

(Florida street address)

(City)

Florida

(Zip Code)

**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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



The date of each amendment(s) adoption: 10/18/2010

(date of adoption is required)

Effective date if applicable: 10/18/2010

(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 11/13/2010

Signature Carmen Williams

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Carmen Williams  
(Typed or printed name of person signing)

President  
(Title of person signing)

MIAMI BEACH HI-TIDE ALUMNI ASSOCIATION, INC.

32-0288332

The number one goal of this organization is to enhance higher educational opportunities for the students at Miami Beach Senior High School, through promotion and management of monies collected and awarded as scholarships by the organization. We, the Miami Beach Hi-Tide Alumni Association, are committed and we advocate "No Child Left Behind" and focus our energy and attention to elevating young students (including disadvantaged and at-risk youth) into leadership roles and greater opportunities. The purpose of our request for 501(c) (3) status is to assist as we do all that we can to raise funds through philanthropic support to make possible our goal of giving students a brighter future and to let them know that they are not forgotten. Many of the alumni of this organization are just like the students that we are trying to assist. We come from single parent homes, had to work to help, and had the desire to attend college but just didn't if it would be possible financially. In fulfilling this mission, the Miami Beach Hi-Tide Alumni Association will insure that all of its efforts and activities are consistent with our mission, values, strategic objectives, policies and procedures