

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Miami Beach Hi-Tide Alumni Association, Inc.

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 Williams

(Name of Contact Person)

Miami Beach Hi-Tide Alumni Association, Inc.

(Firm/ Company)

13117 SW 49th Court

(Address)

Miramar, FL 33027-5539

(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 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)

2012 AUG 13 AM 8:4
OFFICE OF THE CLERK
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

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2012 AUG 13 AM 8:4
DIVISION OF CORPORATIONS
OFFICE OF FILING



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2012

CARMEN WILLIAMS
MIAMI BEACH HI TIDE ALUMNI ASSOCIATION
13117 SW 49TH COURT
MIRAMAR, FL 33027-5539

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

We have received your document for MIAMI BEACH HI TIDE ALUMNI ASSOCIATION, INC.. However, the document has not been filed and is being returned for the following:

The fee to file your document is \$35.

The fee for a certified copy is \$8.75 for the first 8 pages of the document and \$1 per page for each additional page, not to exceed \$52.50. A certificate of status is \$8.75.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 912A00021138

RECEIVED

AUG 27 PM 2:25

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Miami Beach Hi-Tide Alumni Association, Inc.

12 SEP 5 AM ID: 30

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

N09000007438

(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:

N/A

*(Principal office address **MUST BE A STREET ADDRESS**)*

C. Enter new mailing address, if applicable:

N/A

*(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: N/A

(Florida street address)

New Registered Office Address:

N/A

(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

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 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> <u>N/A</u> Change	_____	_____	_____
<input type="checkbox"/> <u>N/A</u> Add	_____	_____	_____
<input type="checkbox"/> <u>N/A</u> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Article II - Purpose - 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 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 (3) (c) status is to assist us as we do all that we can to raise funds through philanthropic support from alumni members and others to make possible our goal of giving students a brighter future; and to let them know that they are not forgotten. Many of us come from single parent homes, had to work to help, and had the desire to attend college but not the means. In fulfilling this mission, the Miami Beach Hi-Tide Alumnj Association will ensure that all of its efforts and activities are consistent with our mission, values, strategic objectives, policies and procedures.

The date of each amendment(s) adoption: 08/08/2012

Effective date if applicable: 08/08/2012
(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 08/08/2012

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)