N090000008215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2015 SEP -4 PM 2: 19

Amend/cus

SEP 10 2015

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: _Cypress Bay Boys Golf Team Booster Club, Corp_

DOCUMENT NUMBER: _N09000008215_

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

Please return all correspondence concerning this matter to the following:

Blanca Lopez

(Name of Contact Person)

_____
(Firm/ Company)

4177 Staghorn Ln

(Address)

Weston, FL 33331

(City/ State and Zip Code)

bmorales @ partnercarepharmacy.com

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

For further information concerning this matter, please call:

Blanca Lopez at _(305) 527-2675_

(Name of Contact Person)   (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 & ☐ $43.75 Filing Fee & ☒ $52.50 Filing Fee
                   Certificate of Status   Certified Copy   Certificate of Status
                                           (Additional copy is   Certified Copy
                                           enclosed)   (Additional Copy is
                                                                   Enclosed)

Mailing Address   **Street Address**
Amendment Section   Amendment Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                                       Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Cypress Bay ~~Boys~~ Golf Team Booster Club, Corp.

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

N09000000 8215

(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:

_____*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: 4177 Staghorn Ln
(Principal office address MUST BE A STREET ADDRESS)   Weston, FL 33331

C. Enter new mailing address, if applicable: (same)
(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:* _____

_____, Florida _____
       (City)   *(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

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 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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change ___ Add _X_ Remove	P	Cachon, Kelly	4312 Vineland Cir Weston, FL 33332
2) ___ Change ___ Add _X_ Remove	TR	Cachon, Jorge	4312 Vineland Cir Weston, Fl 33332
3) ___ Change _X_ Add ___ Remove	P	Lopez, Blanca	4177 Staghorn Ln Weston, Fl 33331
4) ___ Change _X_ Add ___ Remove	TR	Lopez, Ricardo	4177 Staghorn Ln Weston, Fl 33331
5) ___ Change ___ Add ___ Remove			
6) ___ Change ___ Add ___ Remove			

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

_____

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The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 _____9/3/15_____

Signature _____

(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)

_____Blanca Lopez_____

(Typed or printed name of person signing)

_____President_____

(Title of person signing)