## N09000010767

(Re	questor's Name)	
(Ad	dress)	,- <u>.</u>
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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JUL 15 S. PRATHER

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Inlet Grove C	Community High School I	oundation, Inc	
N09000010767 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	are submitted for filing.		
Please return all correspondence concerning th	is matter to the following	:	
Dr. Emma T. Banks			
	(Name of Contact	Person)	
	(Firm/ Compa	iny)	
6669 Audubon Trace West			
	(Address)	<del></del>	
West Palm Beach, FL 33412			
	(City/ State and Z	p Code)	
emmabanks20@aol.com			
E-mail address: (to F	e used for future annual	report notification	n)
For further information concerning this matter,	please call:		
Emma T. Banks		561 at	644-5194
(Name of Contact I	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount m	nade payable to the Florid	a Department of	State:
☐ \$35 Filing Fee ☐\$43.75 Filing Fe Certificate of St		Certifi is Certifi	O Filing Fee icate of Status led Copy tional Copy is sed)
Mailing Address Amendment Section	-	itreet Address Amendment Secti	on

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

	Articles of Amend	ment	50.
	to Articles of Incorpor	ration	
Inlet Grove Community High School Foundation.	of c		
(Name of Corporation as currently filed with the		<del></del>	18
N09000010767	torida Dept. 01 State	2)	i i
	. 1		
	nt Number of Corpora	·	C11 
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Floria</i>	la Not For Profit Corporati	$\overline{\omega}$ . $\overline{\omega}$ adopts the followin
A. If amending name, enter the new name of the	orporation;		
Children in Need Scholarship Foundation, Inc.	<del></del>		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	corporation" or "ince	orporated" or the abbrevia	The new tion "Corp," or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL	DBFCC)	Need Scholarship Foundation	on, Inc.
MOST BE A STREET AL	6669 Audub	oon Trace West	
	West Palm E	Beach, FL 33412	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	Children in	Need Scholarship Foundation	on, Inc.
	6669 Audub	on Trace West	
	West Palm	Beach, FL 33412	
D. If amending the registered agent and/or regist new registered agent and/or the new registered	ed office address in	Florida, enter the name of	f the
•	nma T. Banks, EdD.		
<u> Name of New Registered Agent:</u>		<u> </u>	
	69 Audubon Trace W	'est	
New Registered Office Address:		(Florida street address)	
	est Palm Beach	Flo	33412
	(City)		Lip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent	stered Agent: I am familiar with and	t accept the obligations of the	he position.
J. L.	Signature of Nev	Registered Agent, if chang	<u>1</u> ging

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 X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add X Remove	<u>P</u>	Shuler-Carey, Barabara	12881 Cocoa Pines Drive Boynton Beach, FL 33436
2) Change Add	<u>Mmbr</u>	Barnes, Lynn High	600 W. 28th Street Riviera Beach, FL 33404
X   Remove	<u>D,S</u>	Elliott Morrison, Beverly	West Palm Beach, FL 33401
4) Change X Add	<u>D.T</u>	Hampton, Justine	3561 Long Pint Ct Apt B-2 Greenacres, FL 33463
Remove  5) Change	D.P	Banks, Clotee	8279 Bob-O Link Drive West Palm Beach, FL 33412
6) <u>X</u> Change Add Remove	<u>D.C</u>	Banks, Emma T. EdD.	6669 Audubon Trace West West Palm Beach, FL 33412
_ <del></del>	ding additional A neets, if necessary,	rticles, enter change(s) here:  ). (Be specific)	

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	4. 11.02. 202.	
The date of each amendment date this document was signed.	(s) adoption: April 02, 2024	, if other than the
Effective date if applicable:	April 02, 2024	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not Department of State's records.	ot be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE)</u>	
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendments.	

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 04/02/2024;
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)
Emma T. Banks, EdD.
(Typed or printed name of person signing)
Director and Chairman
(Title of person signing)

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