# 1100000001377

(Re	equestor's Name)	
(Ac	ldress)	ν
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





500188828655

12/21/10--01026--016



Amend 12/20/10

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PRATION: 05	ceola Coun	ty Schoo	ol Boa	ırd Leasii	ng Corporation
DOCUMENT NUM	BER: N1000	00001377				
The enclosed Article	s of Amendmen	t and fee are sub	mitted for fi	iling.		
Please return all corr	espondence con	: cerning this matt	er to the fol	lowing:		
		Sarah E	. Graber, (	CPA		
		(Name of	Contact Per	son)		
	The	School Distric	t of Osceo	ola Co	unty, FL	
		(Firm	/ Company)	•		
<u></u>		817 Bill Beck Blvd.				
(Address)						
		Kissimm	ee, FL 34	744		
		(City/ Stat	e and Zip C	ode)		
		grabersa@				
Fan familian in familia		dress: (to be used		annuai r	ероп поши	acion)
For further information	on concerning u	is matter, please	caii:			
Sarah E. Graber,	CPA		at (	107	870-482	23
(Name	of Contact Pers	on)		Area Co	ode & Dayti	23 me Telephone Number)
Enclosed is a check f	or the following	amount made pa	ayable to the	Florida	a Departmen	t of State:
<b>✓</b> \$35 Filing Fee	□ \$43.75 Fi		□\$43.7			□ \$52.50 Filing Fee
	Certificate of	f Status	Certified (Addition enclosed	nal cop		Certificate of Status Certified Copy (Additional Copy is enclosed)
	ng Address			Street A		,
	idment Section	<del>)</del>			nent Section	
	ion of Corporatio Box 6327	ns i		Division Clifton F	of Corporatio	ons
	box 6327 nassee, FL 32314	ì			sunding ecutive Cente	r Circle

Tallahassee, FL 32301

### **Articles of Amendment** to **Articles of Incorporation**

## Osceola County School Board Leasing Corporation (Name of Corporation as currently filed with the Florida Dept. of State) N10000001377 (Document Number of Corporation (if known)

. If amending name, enter the new name	or the corporation.	
he new name must be distinguishable and bbreviation "Corp." or "Inc." <u>"Company"</u>		
. Enter new principal office address, if ag Principal office address <u>MUST BE A STRE</u>		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		
If amending the registered agent and/or	registered office address in Flor	ids, enter the name of the
If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Flor	ida, enter the name of the
If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office address in Flor gistered office address:	ida, enter the name of the
ť	registered office address in Floreistered office address:  (Florida street address	
<u>Name of New Registered Agent:</u>	gistered office address:  (Florida street addres	s) , Florida
new registered agent and/or the new reg	gistered office address:	s)
new registered agent and/or the new reg	(Florida street address:  (City)	s) , Florida (Zip Code)

## 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>	Address	Type of Action
Pres	John McKay	817 Bill Beck Blvd.	
		Kissimmee, FL 34744	☑ Remove
Pres	Cindy Lou Hartig	817 Bill Beck Blvd.	
		Kissimmee, FL 34744	Remove
<u>VP</u>	David E. Stone	817 Bill Beck Bivd.	
		Kissimmee, FL 34744	
	ding or adding additional Articles dditional sheets, if necessary). (Be		
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<del>-</del> · <u></u> .			and the same of th
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## 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>	Name	<u>Address</u>	Type of Action
<u>VP</u>	Marjorie Guillen-Melendez	817 Bill Beck Blvd. Kissimmee, FL 34744	☑ Add □ Remove
Dir	John McKay	817 Bill Beck Blvd. Kissimmee, FL 34744	
Dir	Tom Long	817 Bill Beck Blvd. Kissimmee, FL 34744	☑ Add □ Remove
	nding or adding additional Articles, ente additional sheets, if necessary). (Be spec		
	7-111		

# 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
Dir	David E. Stone	817 Bill Beck Blvd. Kissimmee, FL 34744	
Dir	Barbara Horn	817 Bill Beck Blvd. Kissimmee, FL 34744	☑ Add □ Remove
E. <u>If amer</u> (attach d	nding or adding additional Articles additional sheets, if necessary). (B	<u>, enter change(s) here</u> : e specific)	

The date of each amendment(s) a	doption: November 16, 2010
	(date of adoption is required) vember 16, 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s).
✓ There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.
Dated December	er 15, 2010
Signature	arel Sol
have not	chairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or if appointed fiduciary by that fiduciary)
	Sarah E. Graber
	(Typed or printed name of person signing)
	Treasurer
	(Title of person signing)