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9/11/2015

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From:

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Account Number : 076064003722 Phone : (888)491-1120 Fax Number : (954)343-6962

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COR AMND/RESTATE/CORRECT OR O/D RESIGN OSCEOLA COUNTY SCHOOL BOARD LEASING CORPORATION

Certificate of States	Ф
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Estimated Charge	\$35.98

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9/15/2015 10:53:53 AM PAGE 1/001 Fax Server



September 15, 2015

FLORIDA DEPARTMENT OF STATE

OSCEOLA COUNTY SCHOOL BOARD LEASING CORPORATION **FAX FILING***GREENSPOON MARDER, P.A.**
KISSIMMEE, FL 34744

SUBJECT: OSCEOLA COUNTY SCHOOL BOARD LEASING CORPORATION & REF: N10000001377



We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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) 245-6050.

Tina D Cannon Regulatory Specialist II FAX Aud. #: H15000219657 Letter Number: 415A00019400 850-617-6381

9/16/2015 10:29:50 AM PAGE 1/001 Fax Server



September 16, 2015

FLORIDA DEPARTMENT OF STATE

OSCEOLA COUNTY SCHOOL BOARD LEASING CORPORATION 817 BILL BECK BOULEVARD KISSIMMEE, FL 34744

SUBJECT: OSCEOLA COUNTY SCHOOL BOARD LEASING CORPORATION REF: N10000001377

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

The wording is blurry and unreadable.

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 \cdot call (850) 245-6050.

Tina D Cannon Regulatory Specialist II FAX Aud. #: H15000219657 Letter Number: 215A00019502 9/16/2015 3:53:03 PM PAGE 3/007 Fax Server

COVER LETTER

Division of Corporation	s			
NAME OF CORPORATIO	OSCEOLA COUNTY	SCHOOL BOARD		
DOCUMENT NUMBER:	N10000001377			
The enclosed Articles of Amo	endment and fee are subm	itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
USHER L.BROWN				
	(Name of Contact Per	son)	
GREENSPOON MARDER	LAW			
		(Firm/ Company)	1	
201 E PINE ST, STE 500				
		(Address)		***************************************
ORLANDO, FL 32801				•
	(City/ State and Zip C	ode)	
TAMI.AUSTIN@GMLAW.	COM.			
E	mail address: (to be used	for future annual repo	rt notification	n)
For further information conce	erning this matter, please c	alt		
USHER L BROWN		nt .	407	425-6559 X 1918
(Name of Contact Person)	•	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fe	llowing amount made pay	able to the Florida D	epartment of !	State:
S35 Filing.Fee	□\$43.75 Piling Fee & □ Certificate of Status		Certifi Certifi	D Filing Fee leart of Status leaf Copy tional Copy is used)
Mailing A			et Address	
Amendmen			indment Secti	
	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building		prations	
	, FL 32314	Clifton Building 2661 Executive Center Circle		

Tallahassee, PL 32301

Acres 1

Articles of Amendment ŧo Articles of Incorporation

OSCEOLA COUNTY SCHOOL BOARD LEAS	ING CORPORATION	
(Name of Corporation	n as currently filed with the Florida De	pt. of State)
N10000001377		
(Досы	ment Number of Corporation (if known)	
rsuant to the previsions of section 617,1006, Flo tendment(s) to its Articles of Incorporation:	orida Statunes, this <i>Florida Not For Profi</i> i	a Corporation adopts the following
If amending name, enter the new name of th	e corporation:	
		The new
me must be distinguishable and contain the word Company" or "Co." may not be used in the nam		e abbreviation "Corp." or "Inc."
Enter new principal office address, if applica	able:	
rincipul office uddress <u>MUST BE A STREET A</u>	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	 .
		المبيد
. 16		01
If amending the registered agent and/or regi- new registered agent and/or the new register		ne name of the
Name of New Registered Agent:		<u> </u>
Blune of New Registeren Agent.		
	201 E PINE ST. STE 500	
•		= T
New Registered Office Address:	(Florida stre	
New Registered Office Address:	(Florida stre	

E. If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)		٠
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	: JUNE 30, 2015	
The date of each amendment(s) a	deption:	if other than the
date this document was signed.		
JUL	NE 30, 2015	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will nepartment of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a was/were sufficient for approv	idopted by the members and the number of votes cast for the amendment(s) al.	
There are no members or men adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were tors.	
Dated SEPTEME	BER 15, 2015	_
L.		≓ ⊼s
Signature		5
	irman or vice chairman of the board, president or other officer-if directors	SE CAS
	con selected, by an incorporator – if in the hands of a receiver, trustee, or	
omer court	appointed fiduciary by that fiduciary)	
1101.000	V 774 CVP (S 224
USHER	LBROWN	
	(Typed or printed name of person signing)	<u> </u>
	(Typed of profed finite of person signing)	<u>\</u> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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*************************************	(Title of person signing)	