

N100000009536

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 NOV -6 PM 12:10

Amend
@ 11.8.13

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: **BUCS FOOTBALL BOOSTERS, Inc.**

DOCUMENT NUMBER: **N10000009536**

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

Please return all correspondence concerning this matter to the following:

Angelique Gossman

(Name of Contact Person)

(Firm/ Company)

939 S Bluebird Ln

(Address)

Homestead, FL 33035

(City/ State and Zip Code)

raag939@bellsouth.net

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

For further information concerning this matter, please call:

Angelique Gossman

(Name of Contact Person)

at (**305**) **951-6177**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

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

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 NOV -6 PM 12:10

BUCS Football Boosters, Inc.

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

N10000009536

(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:

(Principal office address MUST BE A STREET ADDRESS)

Bucs Football Boosters, Inc.

939 S Bluebird Ln

Homestead, FL 33035

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Bucs Football Boosters, Inc.

939 S Bluebird Ln

Homestead, FL 33035

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:

Angelique Gossman

939 S Bluebird Ln

(Florida street address)

New Registered Office Address:

Homestead

(City)

33035

, 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

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.

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

1) <u> </u> Change	<u>V</u>	<u>Orlando Deschapell</u>	<u>15823 SW 286 ST</u>
<u>X</u> Add			<u>Homestead, FL 33033</u>
<u> </u> Remove			

2) <u> </u> Change	<u>S</u>	<u>Threda Mitchell</u>	<u>27923 SW 131 Ave</u>
<u>X</u> Add			<u>Homestead, FL 33032</u>
Remove			

3)	Change	<u>T</u>	<u>Viola Lafaille</u>	<u>32151 SW 204 CT</u>
	<u>X</u>			<u>Homestead, FL 33030</u>
	Remove			

4) <input type="checkbox"/> Change	<u>DV</u>	<u>Lisa Murray</u>	<u>23400 SW 152 CT</u>
<input type="checkbox"/> Add			<u>Homestead, FL 33032</u>
<input checked="" type="checkbox"/> Remove			

5) <input type="checkbox"/> Change	<u>DT</u>	<u>Paul Underwood</u>	<u>18305 SW 296 ST</u>
<input type="checkbox"/> Add			<u>Homestead, FL 33030</u>
<input checked="" type="checkbox"/> Remove			

d) _____ Change _____
 _____ Add _____
 Remove _____

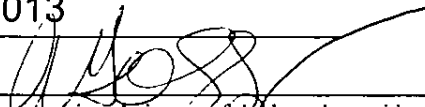
This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

The date of each amendment(s) adoption: 10/16/2013, if other than the date this document was signed.

Effective date if applicable: _____
(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 11/04/2013
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)

Angelique Gossman
(Typed or printed name of person signing)
President
(Title of person signing)