

N100000010263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

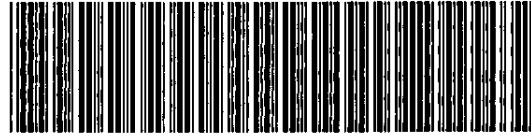
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800215140498

Amend

12/19/11--01024--010 **35.00

FILED
2011 DEC 19 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOR
12/20/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PALMETTO CHARTER PTO, INC.

DOCUMENT NUMBER: N10000010263

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

Please return all correspondence concerning this matter to the following:

ALAN M. STEIN
(Name of Contact Person)

ALAN M. STEIN ACCOUNTING & TAX SERVICE, INC.
(Firm/ Company)

3930 E STATE ROAD 64
(Address)

BRADENTON, FL 34208
(City/ State and Zip Code)

STEINACCOUNTING@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALAN M. STEIN at (941) 749-5364
(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:

- | | | | |
|---|--|---|--|
| <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

2011 DEC 19 PM 12:26

Palmetto Charter PTO, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N10000010263

(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:

1601 17th St. W.

(Principal office address MUST BE A STREET ADDRESS)

Palmetto, FL 34221

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1601 17th St. W.

Palmetto, FL 34221

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: Alan M. Stein

3930 E State Road 64

(Florida street address)

New Registered Office Address:

Bradenton

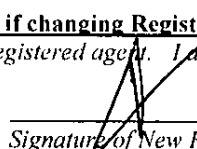
(City)

, Florida 34208

(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

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) <u>P</u>	<u>Ann Konnen</u>	<u>1601 17th St W</u> <u>Palmetto, FL 34221</u>
2) <u>VP</u>	<u>Latrice Miller</u>	<u>1601 17th St W</u> <u>Palmetto, FL 34221</u>
3) <u>S</u>	<u>Tina Gilbert</u>	<u>1601 17th St W</u> <u>Palmetto, FL 34221</u>
4) _____	_____	_____
5) _____	_____	_____
6) _____	_____	_____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) <u>P</u>	<u>Sarah Eurice</u>	4) _____	_____
2) <u>S</u>	<u>Rachel Kendzior</u>	5) _____	_____
3) _____	_____	6) _____	_____

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

See attached Sheet.

Article VIII: This corporation is organized exclusively for charitable and educational purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 (c)(3) of the Internal Revenue Code or the corresponding section of any future United States Internal Revenue law.

Article X: Upon the winding up and dissolution of the corporation, after paying or adequately providing for the debts and obligations of the corporation, the remaining assets shall be distributed for one or more exempt purposes within the meaning of section 501 (c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

The date of each amendment(s) adoption: 12/12/11

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 12/12/11

Signature

Schezelle Wyatt

(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)

Schezelle Wyatt

(Typed or printed name of person signing)

Treasurer

(Title of person signing)