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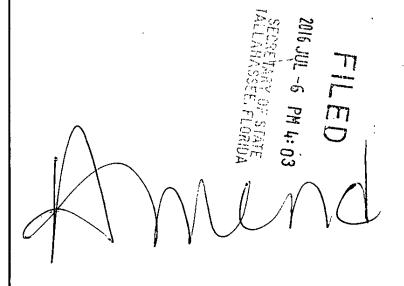
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I ALBRITTON

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Comiston Middle IB World School PTC
DOCUMENT NUMBER: N11000003482
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Conniston Middle IB world School PTO, Inc
(Firm/ Company)
3630 Parker Avenue allost lakes
West Palm Beach FL 33405
(City/ State and Zip Code)
Claudiak bakto Comail Com E-mail address: (to be used for future annual feport notification)
For further information concerning this matter, please call:
Claudia Lipic Bart at 5013734696 (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:
\$35 Filing Fee \$\times \text{\$\frac{1}{2}}\$43.75 Filing Fee \$\times \text{\$\frac{1}{2}}\$43.75 Filing Fee \$\times \text{\$\frac{1}{2}}\$52.50 Filing Fee \$\text{\$\frac{1}{2}}\$Certificate of Status (Additional copy is enclosed) \$\text{\$\frac{1}{2}}\$Certified Copy (Additional Copy is

Mailing Address

TO: Amendment Section

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

Enclosed)

. A	rticles of Amendment		
Ar Ar	to ticles of Incorporation		
AHA Connis		- IB World School	1 f
(<u>Name of Corporation as cu</u>		ida Dept. of State)	
	0000 3432		
(Document N	Number of Corporation (if kn	nown)	
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For	r Profit Corporation adopts the following	
A. If amending name, enter the new name of the corp	oration:		
		The new	
name must be distinguishable and contain the word "cor "Company" or "Co," may not be used in the name.	poration" or "incorporated	l" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	ESS)		
		201	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	CRETARY 6	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Flo	(Florida street address)	
The state of the s		Pla Ma	
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I described the supposite that the suppo		the obligations of the position.	
	Signature of New Registe	ered Agent, if changing	

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	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	T Carrie Ann Braday	n 3630 Parker Ave
Add		West Palm Beach P2
Remove		
2) Change	T Jemifer Briceno.	3630 Parker Avenue
_X Add		32(10)
Remove		
3)Change		
Add		
Remove		
4) Change		
Add		***
Remove		
5) Change		
Add		· · · · · · · · · · · · · · · · · · ·
Remove		
6) Change		
Add		
Remove		

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
4			
nk			
n/a			

The date of each amendment(s) ad	option:	, if other than the
date this document was signed. Effective date if applicable:	May 14,20	16
Extective date <u>n applicable</u> .	(no more than 99 days after amendment file	date)
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requartment of State's records.	sirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes case.	t for the amendment(s)
☐ There are no members or memb adopted by the board of directo	ers entitled to vote on the amendment(s). The ame	ndment(s) was/were
Dated	0/21/10	
Signature	(36)	····
	mair or vice chairman of the board, president or oth	
	n selected, by an incorporator – if in the hands of a ppointed fiduciary by that fiduciary)	receiver, trustee, or
3,,,,		RUBARTO
***************************************	(Typed or printed name of person signature)	
	President	

(Title of person signing)