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PICK-UP	☐ WAIT	MAIL
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(Bu	isiness Entity Name	<del>?</del> )
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Certified Copies	Certificates o	of Status
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Kamblewood Middle School Band Booslers Organization
DOCUMENT NUMBER: N10000 730Z
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)
Ramblewood Middle School Band Boosles Organization, Inc.
8505 West Atlantic Bluch
Coral Springs FL 33071
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person) at 754-224-6112 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Fee & □S52.50 Filing Fee     Certificate of Status
heck # 2589, Cleared 8/15/19 enclosed) (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation

of

Kamblewood Middle School (Name of Corporation as current)	al Band Boos!	ers Organi	Zation, Inc
NIO	er of Corporation (if known)	or State)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit C</i>	orporation adopts the	following
A. If amending name, enter the new name of the corporati	ion: N/A		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the a	bbreviation "Carp;" e	or Mc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	)	:	9 PP .
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	:	3 5 4
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	ddress:		
Name of New Registered Agent:	NOVA KOUD 340 NW 92 (Florida street)	nan nd Ter	
New Registered Office Address:	al Springs	Florida	071
New Registered Agent's Signature, if changing Registered Albereby accept the appointment as registered agent. I am fan	niliar with and accept the obliga La La Moderner	~	
• 218	gnature of New Registered Agen	i, ij 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		<u>Doc</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	I	Wendy Ulman	8110 NW 94 Ave Tamarac, FL 33321
2) Change Add Remove	I	Hara Rodman	240 NW 92 Ter Coral Springs FL 33071
3 ) Change Add Remove	VP	Allyson Korenic	10104 NW 83 Stree Tamarac, FL 33321
4) Change Add Remove	<u>15</u>	Kyle Kurth	710 NW 79 Ave Margale FL 33063
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)	NIA
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		<del></del>
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	e date of each amendment(s) adoption:	if other than the
	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be nument's effective date on the Department of State's records.	listed as the
Ado	option of Amendment(s) ( <u>CHECK ONE</u> )	
	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.	
	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)  (Typed or printed name of person signing)	
	President (Title of person signing)	