

N11000007378

(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



800275443968

08/10/15--01011--025 **35.00

15 AUG 26 AM 11:16

St. Louis
DIVISION OF REVENUE

AUG 27 2015
C LEWIS

COVER LETTER

TO: Amendment Section
* Division of Corporations

NAME OF CORPORATION: MINNEOLA INSTRUMENTAL MUSIC ASSOCIATION,INC

DOCUMENT NUMBER: N 11000007378

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

Please return all correspondence concerning this matter to the following:

CRISTINA STUEWE-PATINO

(Name of Contact Person)

MINNEOLA INSTRUMENTAL MUSIC ASSOCIATION,INC

(Firm/ Company)

PO BOX 2012

(Address)

MINNEOLA,FL 34755

(City/ State and Zip Code)

treasurer@lmshawksband.com

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

For further information concerning this matter, please call:

Cristina Stuewe-Patino

352

777 3109

at

(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

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 11, 2015

CRISTINA STUEWE-PATINO / MINNEOLA INSTRUMENTAL MUSIC
PO BOX 2012
MINNEOLA, FL 34755 US

SUBJECT: MINNEOLA INSTRUMENTAL MUSIC ASSOCIATION, INC.
Ref. Number: N11000007378

We have received your document for MINNEOLA INSTRUMENTAL MUSIC ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 815A00016912

Articles of Amendment
to
Articles of Incorporation
of

DIVISION OF CORPORATIONS
15 AUG 26 AM 11:16

MINNEOLA INSTRUMENTAL MUSIC ASSOCIATION, INC

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

N 11000007378

(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:

N/A

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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

CRISTINA STUEWE-PATINO

101 North Hancock Minneola, FL 34755

(Florida street address)

New Registered Office Address:

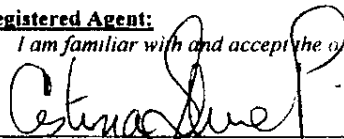
(City)

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

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>HOPE BLUME</u>	<u>14430 INDIAN RIDGE TRAIL</u> <u>CLERMONT, FL 34711</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>JOEY PEDRAZA</u>	<u>11715 BRUCE HUNT RD</u> <u>CLERMONT, FL 34715</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>CRISTINA STUEWE-PATINO</u>	<u>14630 POINTE EAST TRL</u> <u>CLERMONT, FL 34711</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>KIMBERLY B MOYER</u>	<u>840 HIGH POINTE CIRCLE</u> <u>MINNEOLA, FL 34715</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>ML</u>	<u>STEFAN D SCHREINER</u>	<u>972 DREXEL AVE</u> <u>CLERMONT, FL 34711</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>ML</u>	<u>JULIE WALKER</u>	<u>2959 SANTA MARCOS DR</u> <u>CLERMONT, FL 34711</u>

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

X Remove President Stephanie Schonaerts 2324 Zaltana Circle Minneola FL 34715

