

Office Use Only



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17 SEP 29 PH 3: 00

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Newsome Orchest ON:	ra Boosters Inc.		
	N11000008574			
DOCUMENT NUMBER: _	· · · · · · · -			
The enclosed Articles of Am	endment and fee are subm	itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
Marcia Kneusel				
	(Name of Contact Person	on)	
Newsome Orchestra Booster	rs, Inc			
		(Firm/ Company)		
16550 Fishhawk Blvd.				
		(Address)		
Lithia, FL, 33547				
	(City/ State and Zip Co	de)	
mkneusel@gmail.com				
Е	-mail address: (to be used t	or future annual report	notification)
For further information conc	erning this matter, please c	all:		
Marcia Kneusel		8 at	13	523-5445
,	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida Dep	partment of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & U Certificate of Status	3\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	ddress	Stree	t Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 24, 2017

MARCIA KNEUSEL 16550 FISHHAWK BLVD LITHIA, FL 33547

SUBJECT: NEWSOME ORCHESTRA BOOSTERS INC.

Ref. Number: N11000008574

We have received your document for NEWSOME ORCHESTRA BOOSTERS 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):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Rebekah White Regulatory Specialist II

Letter Number: 717A00014919

Please let me Know if any fother edits are necessary to complete this Memini Knows

Articles of Amendment

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• •	Articles of Incorporation of	17 SEP 29 PH 3: 00
No serve	Dr. Wichre	TRANSPORT OF THE PARTY OF THE P
(Name of Corporation	as currently filed with the Flori	da Dept. of State)
		,
(Docum	nent Number of Corporation (if kn	own)
ursuant to the provisions of section 617.1006, Flor mendment(s) to its Articles of Incorporation:	ida Statutes, this Florida Not For	Profit Corporation adopts the following
If amending name, enter the new name of the	corporation:	
		The ne
ame must be distinguishable and contain the word Company" or "Co." may not be used in the name		" or the abbreviation "Corp." or "Inc."
 Enter new principal office address, if applical Principal office address <u>MUST BE A STREET A</u> 		
		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BOX)	
		 .
. If amending the registered agent and/or regis	tered office address in Florida, o	enter the name of the
new registered agent and/or the new register		
Name of New Registered Agent:		
	(Flo	rida street address)
New Registered Office Address:		
		Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing R		
hereby accept the appointment as registered agen	t. I am familiar with and accept t	he obligations of the position,
_	Signature of New Registe	ared Agent if changing
	Dignamic of Hen Kegiste	eva eigem, y enunging

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>V</u> <u>Mil</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TR	Susan Tumlin	17835 Mission Oak Drive
Add			Lithia, FL 33547
X Remove			
2) Change	TR	Marcia Kneusel	16216 Bridgepark Drive
Add			Lihtia, F1. 33547
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti utach additional sheets, if necessary).	(Be specific)			
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			 <u>.</u>	
	<u>-</u>	<u> </u>		
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	ate of each amendment(s) adoption:, if it is document was signed.	f other than the
	ive date if applicable:	
Hecuv	(no more than 90 days after amendment file date)	·
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li- ent's effective date on the Department of State's records.	sted as the
doptio	ion of Amendment(s) (CHECK ONE)	
	the amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) ras/were sufficient for approval.	
	here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.	
	Dated 7 18 17	
	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)	
	Susan Tumlin	
	(Typed or printed name of person signing)	
	Theasurer	
	Treasurer (Title of person signing)	