

N11 00000 9626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

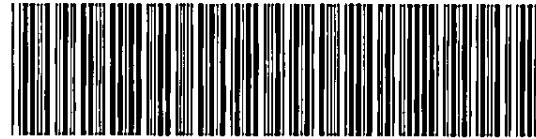
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 DEC -1 PM 3:22
FALLINGWATER

2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2019

LISA BEVERS
4397 SW 95TH ST
OCALA, FL 34476

SUBJECT: HAMMETT L. BOWEN JR. ELEMENTARY PTO INC.
Ref. Number: N11000009626

We have received your document for HAMMETT L. BOWEN JR. ELEMENTARY PTO 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 document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Catherine M Wood
Regulatory Specialist II

Letter Number: 719A00021509

2019 DEC -1 AM 11:54

RECEIVED

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Hammett L. Bowen Jr. Elementary PTO Inc.

DOCUMENT NUMBER: N110000009626

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

Please return all correspondence concerning this matter to the following:

Lisa M. Bevers

(Name of Contact Person)

Hammett L. Bowen, Jr. PTO

(Firm/ Company)

4397 SW 95th Street

(Address)

Ocala, FL 34476

(City/ State and Zip Code)

Lisa.Bevers@marion.k12.fl.us

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

For further information concerning this matter, please call:

Lisa Bevers

(Name of Contact Person)

at 352-207-7749

(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)

(already sent /
submitted)

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

Hammett L. Bowen Jr. Elementary PTO INC.

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

1110000009626

(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)

Hammett L. Bowen Jr. Elementary
4397 SW 95th Street
Ocala, FL 34476

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

/

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:

Lisa M. Bevers

4397 SW 95th St.

(Florida street address)

New Registered Office Address:

Ocala

(City)

Florida 34476

(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.

Lisa M. Bevers

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>

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

P

Sarah Yeager

4397 SW 95th St
Ocala, FL 34476

☐ Add

☒ Remove

2) ☒ Change

VDP

Angelia Chancey
(From Vice Pres. to President)

☐ Add

☒ Remove

3) ☐ Change

I

Stacy Perry

☐ Add

☒ Remove

4) ☐ Change

S

Zayda Hallam

☐ Add

☒ Remove

5) ☐ Change

V

Heidi Eck

☒ Add

☐ Remove

6) ☐ Change

S

Lisa Bevers

☒ Add

☐ Remove

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

N/A

The date of each amendment(s) adoption: 09/17/19 if other than the date this document was signed.

Effective date if applicable: 09/17/19
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 10/23/19

Signature Lisa M. Bevers
(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)

Lisa M. Bevers
(Typed or printed name of person signing)

Secretary
(Title of person signing)