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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

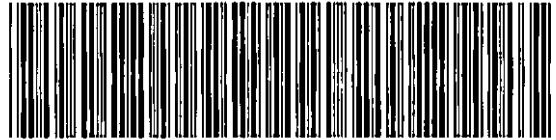
(Business Entity Name)

(Document Number)

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US/20/18-1165-15 **

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AUG 23 2018

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18 AUG 20 AM 6:30
2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Palm Beach Association of School Psychologists

DOCUMENT NUMBER: N11000010008

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

Please return all correspondence concerning this matter to the following:

Sheresa Fairclough

(Name of Contact Person)

Palm Beach Association of School Psychologists

(Firm/ Company)

353 River Bluff Lane

(Address)

Royal Palm Beach, FL 33411

(City/ State and Zip Code)

pbasptreasurer@gmail.com

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

For further information concerning this matter, please call:

Martha Carias-Otto

305

905-4226

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Articles of Amendment
to
Articles of Incorporation
of

Palm Beach Association of School Psychologists, Inc.

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

N11000010008

(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)

353 River Bluff Lane

Royal Palm Beach, FL 33411

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4788 Acadlan Trl.

Coconut Creek, FL 33073

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:

Sheresa Fairclough

353 River Bluff Lane

(Florida street address)

New Registered Office Address:

Royal Palm Beach

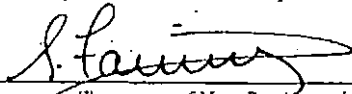
(City)

Florida 33411

(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)

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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) <input type="checkbox"/> Change | <u>Post President</u> | <u>Catherine Samuel-Barrett</u> | <u>6847 Sugarloaf Key St.</u> |
| <input type="checkbox"/> Add | | | <u>Lake Worth, FL 33467</u> |
| <input checked="" type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change | <u>P</u> | <u>Sheresa Fairclough</u> | <u>353 River Bluff Lane</u> |
| <input checked="" type="checkbox"/> Add | | | <u>Royal Palm Beach, FL 33411</u> |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change | <u>T</u> | <u>Martha Carias-Otto</u> | <u>4766 Acadian Tri</u> |
| <input checked="" type="checkbox"/> Add | | | <u>Coconut Creek, FL 33073</u> |
| <input type="checkbox"/> Remove | | | |
| 4) <input type="checkbox"/> Change | <u>S</u> | <u>Laura Tracey</u> | <u>15865 44th St N.</u> |
| <input checked="" type="checkbox"/> Add | | | <u>Loxahatchee, FL 33470</u> |
| <input type="checkbox"/> Remove | | | |
| 5) <input checked="" type="checkbox"/> Change | <u>Post President</u> | <u>Kim Berryhill</u> | <u>9534 Osprey Isles Blvd</u> |
| <input type="checkbox"/> Add | | | <u>West Palm Beach, FL 33412</u> |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> 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: _____, if other than the date this document was signed.

Effective date if applicable: August 6, 2018
(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 8/16/18

Signature [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)

Sheresa Fairclough
(Typed or printed name of person signing)

President
(Title of person signing)