## 111000010263

(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:			
Special instructions to Filling Officer.			

Office Use Only



500252283675

10/03/13--01015--009 \*\*43.75

B OCT -3 MII: 49
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

OCT 10 2013

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: SEMINOL	E BAND B	OOSTER INC.			
DOCUMENT NUMBER: N11000010263					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
ROSANNA DELATOUR					
	(Name of Contact Perso	n)			
(Firm/ Company)					
6200 SW 16 ST					
	(Address)				
PLANTATION FL 33317					
	(City/ State and Zip Cod	e)			
SEMINOLEMIDD	LEBAND@	GMAIL.COM			
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
ROSANNA DELATOUR	<sub>at</sub> 954	, 614-2638			
(Name of Contact Person)		ode & 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	Amend Divisio Clifton 2661 E	Address Iment Section In of Corporations Building Executive Center Circle Essee, FL 32301			

## Articles of Amendment Articles of Incorporation

OCT -3 AMJI: 49

## SEMINOLE BAND BOOSTER INC.

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

N11000010263

(Document Number of Corporation (if known)

name must be distinguishable and contain th "Company" or "Co." may not be used in th	,	The abbreviation "Corp." or
B. Enter new principal office address, if a (Principal office address MUST BE A STR	pplicable:	
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)		
D. If amending the registered agent and/o new registered agent and/or the new re		ter the name of the
		er the name of the
new registered agent and/or the new re		ter the name of the
Name of New Registered Agent:	gistered office address:	er the name of the

Page 1 of 4

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	PT John D V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) X Change	Р	ROSANNA DELATOUR	10600 NW 7TH ST
Add			PLANTATION FL 33324
Remove			
2) X Change	T	YATASHA SOOKHANSINGH	801 SW 42ND AVE
Add			PLANTATION FL 33317
Remove			
3) X Change	<u>S</u>	KAREN MILLER	403 NW 68TH AVE APT 504
Add			PLANTATION FL 33317
Remove			
4) X Change	VC_	JOHANA BARBOZA	2246 NOVA VILLAGE DR
Add			DAVIE FL 33317
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) here:	
E. If amending or adding additional Ar (attach additional sheets, if necessary).	(Be specific)	
	<del></del>	
		_
		_
	<del>-</del>	

	e date of each amendment(s) adoption: $\frac{68/27/13}{1}$	, if other than the
	ective date if applicable: 08/27/13  (no more than 90 days after amendment file date)	_
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.	
	Dated 9/26/13	
	Signature long (10) de	
	(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)	
	ROSANNA DELATOUR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	