

N120000006942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

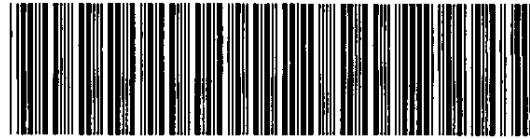
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600264240306

09/12/14--01012--008 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 SEP 12 PM 4:12

C. Lewis
9-18-14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Hillsborough Assoc. of School Library
media Specialists, Inc

DOCUMENT NUMBER: N12000006942

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

Please return all correspondence concerning this matter to the following:

Janet Bowman
(Name of Contact Person)

Davis Elementary School
(Firm/Company)

10907 Memorial Highway
(Address)

Tampa, FL 33615
(City/ State and Zip Code)

Janet.Bowman@sdhc.k12.fl.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janet Bowman at 813, 854-6010 X232
(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:

- | | | | |
|---|--|---|--|
| <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

14 SEP 12 PM 4:12

Articles of Amendment
to
Articles of Incorporation
of

Hillsborough Assoc. of School Library Media
(Name of Corporation as currently filed with the Florida Dept. of State) Specialists, Inc.

N12000006942

(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:

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**)

Janet Bowman, c/o Davis Elem.
10907 Memorial Hwy. media center
Tampa, FL 33615

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

Janet Bowman, c/o Davis Elem. Media
10907 Memorial Hwy. Center
Tampa, FL 33615

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: Janet Bowman c/o Davis Elem.
10907 Memorial Hwy.
(Florida street address)

New Registered Office Address: Tampa, Florida 33615
(City) (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.

X Janet Bowman
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) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>P</u> | <u>Diana Rendina</u> | <u>Stewart Middle School</u>
<u>1125 Spruce St.</u>
<u>Tampa, FL 33607</u> |
| 2) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>P</u> | <u>Janet Bowman</u> | <u>c/o Davis Elem Media</u>
<u>10907 Memorial Hwy</u>
<u>Tampa, FL 33615</u>
<u>ctr</u> |
| 3) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>✓</u> | <u>Janet Bowman</u> | <u>_____</u>
<u>_____</u>
<u>_____</u> |
| 4) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>✓</u> | <u>Deborah Griner</u> | <u>c/o Greco Middle School</u>
<u>6925 E. Fowler Ave</u>
<u>Temple Terrace, FL 33617</u>
<u>media ctr</u> |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>T</u> | <u>Maria Kart</u> | <u>_____</u>
<u>_____</u>
<u>_____</u> |
| 6) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>T</u> | <u>Denise Effertz</u> | <u>c/o Bing Elem. School</u>
<u>6409 36th Ave.</u>
<u>Tampa, FL 33619</u> |

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>S</u> | <u>Scarlett Ferstl</u> | <u></u> |
| <input type="checkbox"/> Add | | | <u></u> |
| <input checked="" type="checkbox"/> Remove | | | <u></u> |
| 2) <input type="checkbox"/> Change | <u>S</u> | <u>Sabrina Fabian</u> | <u>C/o Robinson High School</u> |
| <input checked="" type="checkbox"/> Add | | | <u>6311 S. Lois Ave.</u> |
| <input type="checkbox"/> Remove | | | <u>Tampa, FL 33616</u> |
| 3) <input type="checkbox"/> Change | <u></u> | <u></u> | <u></u> |
| <input type="checkbox"/> Add | | | <u></u> |
| <input type="checkbox"/> Remove | | | <u></u> |
| 4) <input type="checkbox"/> Change | <u></u> | <u></u> | <u></u> |
| <input type="checkbox"/> Add | | | <u></u> |
| <input type="checkbox"/> Remove | | | <u></u> |
| 5) <input type="checkbox"/> Change | <u></u> | <u></u> | <u></u> |
| <input type="checkbox"/> Add | | | <u></u> |
| <input type="checkbox"/> Remove | | | <u></u> |
| 6) <input type="checkbox"/> Change | <u></u> | <u></u> | <u></u> |
| <input type="checkbox"/> Add | | | <u></u> |
| <input type="checkbox"/> Remove | | | <u></u> |

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

N/A

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

The date of each amendment(s) adoption: _____
date this document was signed.

Effective date if applicable: file date 14 SEP 12 PM 4:12
(no more than 90 days after amendment file date)

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 8-6-14

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)

Sabrina Fabian
(Typed or printed name of person signing)
HASLMS Secretary
(Title of person signing)