

N12000008395

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

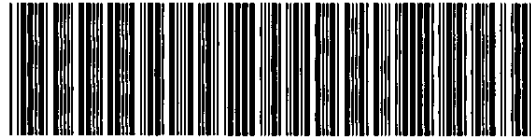
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500252731655

10/24/13--01006--014 \*\*35.00

13 NOV 22 AM 10:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

C. LEWIS  
Nov 25 2013  
EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 30, 2013

WILLIAM VALLADARES / CPOA NJROTC BOOSTER CLUB CORP  
3871 SW 147 AVE UNIT 3  
MIAMI, FL 33185

SUBJECT: CPOA NJROTC BOOSTER CLUB CORP  
Ref. Number: N12000008395

We have received your document for CPOA NJROTC BOOSTER CLUB CORP 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 you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis  
Regulatory Specialist II

Letter Number: 013A00025301

November 18, 2013

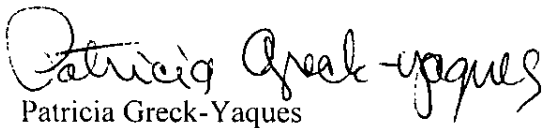
Carolyn Lewis  
Regulatory Specialist II  
Florida Department of State  
Division of Corporations  
PO BOX 6327  
Tallahassee, Florida 32314

RE: CPOA NJROTC BOOSTER CLUB CORP. - Request to Change/Update Officers

Ms. Lewis,

Attached is the completed form, as per your request. Please proceed to process. If you should have any questions, please let us know.

Thank you,

A handwritten signature in black ink, reading "Patricia Greck-Yaques". The signature is written in a cursive, flowing style.

Patricia Greck-Yaques  
786-256-0707

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: **CPOA NJROTC Booster Club Corp.**

DOCUMENT NUMBER: **N12000008395**

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

Please return all correspondence concerning this matter to the following:

**William Valladares, President**

(Name of Contact Person)

**CPOA NJROTC Booster Club Corp.**

(Firm/ Company)

**3871 SW 147 Avenue, Unit 3**

(Address)

**Miami, Florida 33185**

(City/ State and Zip Code)

**valladares.william@gmail.com**

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

For further information concerning this matter, please call:

**Patricia Greck-Yaques** at **786** **256-0707**

(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 &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

APPROVED  
AND  
FILED

13 NOV 22 AM 10:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

**CPOA NJROTC Booster Club, Corp.**

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

**N12000008395**

(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**)

**3871 SW 147 Avenue**

**Unit 3**

**Miami, Florida 33185**

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

**3871 SW 147 Avenue**

**Unit 3**

**Miami, Florida 33185**

**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:

**Patricia Greck-Yagues**

**900 SW 136 Place**

(Florida street address)

New Registered Office Address:

**Miami**

(City)

**33184**

(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

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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Lilian Senferas</u>	<u></u> <u></u> <u></u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>William Valladares</u>	<u>3871 SW 147 Avenue</u> <u>Unit 3</u> <u>Miami, Florida 33185</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Jose R. Gonzalez</u>	<u>14972 SW 29 Terrace</u> <u>Miami, Florida 33185</u> <u></u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Maria Dib</u>	<u>14807 SW 84 Terrace</u> <u>Miami, Florida 33193</u> <u></u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u> <u></u> <u></u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u> <u></u> <u></u>

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

N/A

APPROVED  
AND  
FILED

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the  
date this document was signed.

13 NOV 22 AM 10:43

Effective date if applicable: **October 1, 2013**  
(no more than 90 days after amendment file date)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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 **November 18, 2012**

Signature

Patricia Greck-Yaques  
(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)

**Patricia Greck-Yaques**

(Typed or printed name of person signing)

**Treasurer**

(Title of person signing)