N13 000003941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

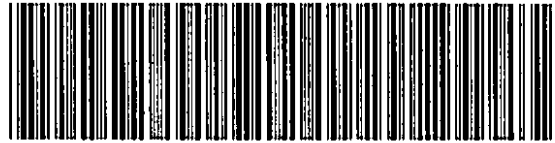
(Document Number)

Certified Copies _____   Certificates of Status _____

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Ponte Vedra Palm Valley Parent Teacher Student Organization Inc.

DOCUMENT NUMBER: N13000003941

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

Please return all correspondence concerning this matter to the following:

Heather Mandeville
_____
(Name of Contact Person)

PVPV PTO
_____
(Firm/ Company)

524 Le Master Drive
_____
(Address)

Ponte Vedra Beach, FL 32082
_____
(City/ State and Zip Code)

heather.hand@gmail.com
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heather Mandeville   at 904-422-1671
_____   _____
(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:

☐ $35 Filing Fee   ☐ $43.75 Filing Fee &   ☑ $43.75 Filing Fee &   ☐ $52.50 Filing Fee
                        Certificate of Status   Certified Copy   Certificate of Status
                                                  (Additional copy is   Certified Copy
                                                  enclosed)   (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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Ponte Vedra Palm Valley Parent Teacher Student Organization,

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

N130000 3941

(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)

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: Heather Mandeville
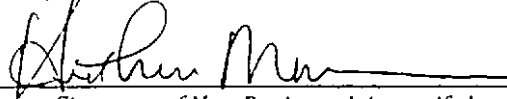
524 Le Master Dr. Ponte Vedra Bch, FL 32082

(Florida street address)

New Registered Office Address:

_____, Florida _____
(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.

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:
X Change	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change ✓ Add ___ Remove	P	Jennifer Cleek	610 A1A North Ponte Vedra Beach, FL 33082
2) ___ Change ✓ Add ___ Remove	T	Heather Mandeville	610 A1A North Ponte Vedra Beach, FL 33082
3) ___ Change ✓ Add ___ Remove	T	Lynn Doslater	610 A1A North Ponte Vedra Beach, FL 33082
4) ___ Change ___ Add ✓ Remove	P	Kate Zarczynski	610 A1A North Ponte Vedra Beach, FL 33082
5) ___ Change ___ Add ✓ Remove	T	Kasey Barrett	610 A1A North Ponte Vedra Beach, FL 33082
6) ___ Change ___ Add ✓ Remove	P	Leslie Behsali	610 A1A North Ponte Vedra Bch, FL 33082

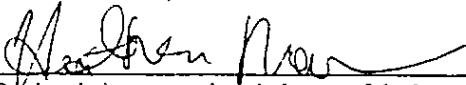## E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary).   *(Be specific)*

7) ✓ Remove   T   Allison Bryce   610 A1A North
 Ponte Vedra Beach, FL 33082

_____

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The date of each amendment(s) adoption: _____ 8 | 10 | 32 _____ , if other than the date this document was signed.

Effective date if applicable: _____
(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|17|22_____

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)

_____Heather Mandeville_____
(Typed or printed name of person signing)

_____Treasurer_____
(Title of person signing)