

N13000007101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

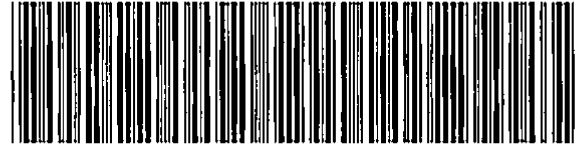
(Business Entity Name)

(Document Number)

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2019 MAY 24 PM 5:25
SEC. OF STATE
TALLAHASSEE, FL

JUN 20 2019
C Kinsey

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: West Broward High School Performing Arts Booster I

DOCUMENT NUMBER: N 13000007101

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

Please return all correspondence concerning this matter to the following:

Melissa Massg

(Name of Contact Person)

(Firm/ Company)

6330 Hawks Bluff Ave

(Address)

Davie, FL 33331

(City/ State and Zip Code)

m/m3699@bellsouth.net

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

For further information concerning this matter, please call:

Melissa Massg

(Name of Contact Person)

at 954-410-2006

(Area Code) (Daytime Telephone Number)

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

- | | | | |
|--|--|---|--|
| <input 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

West Broward High School Performing Arts Booster Club CL
1
(Name of Corporation as currently filed with the Florida Dept. of State)

N13000007101

(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:

West Broward Performing Arts Booster Club Inc. 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)

same 6330 Hawkes Bluff Ave
Davie, FL 33331

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

same - 6330 Hawkes Bluff Ave
Davie FL 33331

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: same Melissa L. Massa
6330 Hawkes Bluff Ave
(Florida street address)

New Registered Office Address:

Davie, Florida 33331
(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

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TALLAHASSEE, FL

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) ☐ Change President Anna M Koldys 16201 Stirling Rd
☐ Add Southwest Ranches FL
☒ Remove 33331
- 2) ☐ Change VP Dolores Scott 1061 NW 190 Ave
☐ Add Pembroke Pines, FL
☒ Remove 33029
- 3) ☐ Change Secretary Barbara Theiss 20426 SW 54th Plac.
☐ Add FT. Lauderdale, FL
☒ Remove 33332
- 4) ☐ Change VP Marketing Deborah Gibbs 5012 SW 149th Ter
☐ Add DAVIE FL 33331
☒ Remove
- 5) ☐ Change President Tessa Santillan 18435 NW 22nd St.
☒ Add Pembroke Pines, FL
☐ Remove 33029
- 6) ☐ Change _____
☐ Add _____
☐ Remove _____

(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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

5-13-19

, if other than the

Effective date if applicable:

6/17/19

(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

6/17/19

Signature

Melissa McGoss

(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)

Melissa McGoss

(Typed or printed name of person signing)

Registered Agent/Treasurer

(Title of person signing)