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S. PRATHER

COVER LETTER

TO: Amendment Section **Division of Corporations** Lake Howell Chorus Boosters, Inc. NAME OF CORPORATION: N13000009990 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ben Patz (Name of Contact Person) RENOSI, Inc. (Firm/ Company) 3554 W Orange Country Club Dr., Suite 140 (Address) Winter Garden, FL 34787 (City/ State and Zip Code) southeast@myrenosi.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 936-6209 Ben Patz 866 (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: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee **\$35** Filing Fee Certificate of Status Certificate of Status Certified Copy (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Lake Howell Chorus Boosters, Inc.

(Name of Corneration as our	rently filed with the Florida Dept. of S	State)	
N1300009990	rently filed with the Florida Dept. of S	<u>/:::::</u> /	
(Document Nu	imber of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statmendment(s) to its Articles of Incorporation:	itutes, this Florida Not For Profit Corpo	oration adopts th	e following
A. If amending name, enter the new name of the corpo	ration:		
			The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbro	eviation "Corp."	or "Inc."
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>		
			 -
	<u> </u>		3
C. Enter new mailing address, if applicable:		Ĺ	17
(Mailing address MAY BE A POST OFFICE BOX)			
			· -
			<u>=</u>
D. If amending the registered agent and/or registered	office address in Florida, enter the na	me of the	<u>.</u> (2)
new registered agent and/or the new registered offi			99
Name of New Registered Agent:			
	(Florida sireet addr	·ess)	
New Registered Office Address:			
		. Florida	
 -	(City)	_, Florida <u> </u>	
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I at		ns 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 X Remove X Add	<u>V</u> <u>Mil</u>	n Doe te Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Donis Wright	5587 White Heron Place
Add			Oviedo, FL 32765
Remove			
2) Change	S	Christine Shields	1945 Hunterfield Rd
Add			Maitland, FL 32751-3547
X Remove			
3) Change	<u>S</u>	April Smith	943 Blueberry Hollow Ct
X Add			Winter Springs, FL 32792
Remove			
4) Change	Т	Myra Engelmeyer	5427 N Woodcrest Dr
Add			Winter Park, FL 32792
X Remove			
5) Change	Т	Kathleen Gould	3646 Jericho Dr
X Add			Casselberry, FL 32707
Remove			
6) Change			
Add			
			
Remove			

	e date of each amendment(s) adoption:, if other than the this document was signed.
EW	ective date <u>if applicable</u> : (no more than 90 days after amendment file date)
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nument's effective date on the Department of State's records.
Ade	option 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 6/30/2017 Signature
	(By the chalman 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)
	Myra Engelmeyer
	(Typed or printed name of person signing)
	Treasurer 27 0 1
	(Title of person signing) تلا الله الله الله الله الله الله الله