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TO: Amendment Section Division of Corporations

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| Florida Coalit | ion of School Board Members, Inc. | |
|--|---|---------------------|
| NAME OF CORPORATION: | | |
| DOCUMENT NUMBER: | | 10 4 0 |
| The enclosed Articles of Amendment and fee a | re submitted for filing. | |
| Please return all correspondence concerning this | s matter to the following: | |
| Bridget Ziegler | | |
| | (Name of Contact Person) | |
| FCSBM | | |
| | (Firm/ Company) | |
| P.O. Box 1602 | | |
| | (Address) | |
| Vero Beach, FL 32961-1602 | | |
| | (City/ State and Zip Code) | |
| info@fcsbm.org | | |
| E-mail address: (to l | oe used for future annual report notification) | |
| For further information concerning this matter, | please call: | |
| Bridget Ziegler | 813 215-112 | 28 |
| (Name of Contact | | e Telephone Number) |
| Enclosed is a check for the following amount n | nade payable to the Florida Department of State: | |
| \$35 Filing Fee \$\Bigs\\$43.75 Filing Certificate of \$\S\$ | Fee & \$\subseteq\$\$\$43.75 Filing Fee & Certificate of St Certificate of St Certified Copy (Additional copy is enclosed) Cartificate of St Certified Copy (Additional Copy Enclosed) | atus |

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



Florida Coalition of School Board Members, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N15000000268 (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: 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: Bridget Ziegler Name of New Registered Agent: 113 S. Monroe St, first floor (Florida street address) New Registered Office Address: Tallahassee 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 und accept the obligations of the position.

Agnature 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>PT</u> <u>V</u> <u>SV</u> | John Doe Mike Jones Sally Smith | |
|----------------------------------|------------------------------------|---------------------------------------|---------------------------------------|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | P | Shawn Frost | · · · · · · · · · · · · · · · · · · · |
| Add | | | |
| X Remove | | | |
| 2) X Change | <u>P</u> | Bridget Ziegler | |
| Add | | | |
| Remove | | | |
| 3) X Change | D | Erika Donalds | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
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| Remove | | | |
| 6) Change | | | |
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| If amending or adding additional Arti (attach additional sheets, if necessary). | (Be specific) | | | |
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| The date of each amendment(s) addate this document was signed. | option: | , if other than the |
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| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this blod document's effective date on the Dep | ck does not meet the applicable statutory filing requirements, this date will partment of State's records. | not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | • |
| was/were sufficient for approva There are no members or membadopted by the board of director September 2 Dated Signature Difficulty the chain have not been | ers entitled to vote on the amendment(s). The amendment(s) was/were ers. 21, 2017 The amendment(s) was/were ers. | |
| | appointed fiduciary by that fiduciary) | |
| Bridget Z | Ciegler Ciegler | |
| | (Typed or printed name of person signing) | |
| President | | |
| | (Title of person signing) | |