## N15000005418

(Re	questor's Name)		
(Ad	dress)		
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Eagles Boys Golf Team	Booster Club IN	IC.	
DOCUMENT NUMBER: 1023				
The enclosed Articles of Amendment and fe	e are submitted for filing	g.		
Please return all correspondence concerning this matter to the following:				15 1101 25
Rebeca Alt				3 3
	(Name of Con	ntact Person)		3
East Lake Eagles Boys Golf Team Booster	Club INC.			
	(Firm/ Co	отралу)		ž.v.
1300 Silver Eagle Dr.				
	(Addr	ress)		
Tarpon Springs, FL 34688-9101				
	(City/ State an	nd Zip Code)		
becaalt@yahoo.com				
E-mail address: (	to be used for future ann	ual report notific	cation)	
For further information concerning this matte	er, please call:			
Rebeca Alt		(727)	656-5778	
(Name of Conta	ct Person)		ode) (Daytime	relephone Number)
Enclosed is a check for the following amoun	t made payable to the Fl	orida Departmer	nt of State:	
	ng Fee & \$\sum \\$43.75 \text{ Filir} of Status	copy is C	552.50 Filing Fee Certificate of State Certified Copy Additional Copy Enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Addr Amendment Division of C Clifton Build	Section Corporations	

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

East Lake Eagles Boys Golf Team Booster Club INC.

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

N15000005418

(Docum	ent Number	r of Corporatio	n (if known)	i.e.
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes	, this <i>Florida N</i>	lot For Profit Corp	oration adopts the following
A. If amending name, enter the new name of the	corporatio	<u>n:</u>		
NA				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incorp	orated" or the abb	
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)	55566	NA		
				***************************************
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u> )	NA		
D. If amending the registered agent and/or registered agent and/or the new registered.			orida, enter the na	ime of the
Name of New Registered Agent:	NA .		<u>^</u>	
New Registered Office Address:	·		(Florida street ada	iress)
				. Florida
		(City)		(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agen			accept the obligation	ons of the position.
	Q:,	mature of Nav	Registered Agent,	if shanging
		униште ој меж	Negwiereu ngem,	y counting

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)	Title	<u>Name</u>		<u>Addres</u> s
1) Change		NA		
Add				
Remove				
2) Change			<del></del>	
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				· · · · · · · · · · · · · · · · · · ·
Remove				
6) Change	<del> </del>			
Add				
Remove				www.

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
This said organization organized exclusively for charitable, religious, educational and scientific purposes, including for
such purposes, the making of distributions to organizations that qualify as exempt organizations described under section
501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning
of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be
distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed
of shall be disposed of by a court or competent jurisdiction in the county in which the principal office of the organization
is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine,
which are organized and operated exclusively for such purposes.

		November 5, 2015			
		option:	, if other than the		
iate	this document was signed.	,			
Effe	NA ective date <u>if applicable</u> :				
		(no more than 90 days after amendment file date	e)		
	te: If the date inserted in this blo ument's effective date on the De	ck does not meet the applicable statutory filing requirer partment of State's records.	ments, this date will not be listed as the		
Adoption of Amendment(s)		(CHECK ONE)			
	The amendment(s) was/were a was/were sufficient for approve	dopted by the members and the number of votes cast for al.	r the amendment(s)		
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	23, 2015			
	Signature <b>BU</b>	aabt			
	have not be	man or vice chairman of the board, president or other of en selected, by an incorporator — if in the hands of a rec appointed fiduciary by that fiduciary)			
	Beca Al	1			
		(Typed or printed name of person signing	ng)		
	Booster	Club President			
		(Title of person signing)			