## N15000009245

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: EAST LAKE TEAM 79 KRUNCH ROBO	TICS BOOSTERS, INC.
DOCUMENT NUMBER: N1500009245	
The enclosed Articles of Amendment and fee are submitted for filing.	2618
Please return all correspondence concerning this matter to the following:	2818 HS4 - 9
EUSABETH MALONEY (Name of Contact Person)	
EAST LAKE HIGH SCHOOL (Firm Company)	
1300 SILVER EAGLE DRIVE	
TARPON SPRINGS FL 34688 (City: State and Zip Code)	
TEAM 79 KRUNCH & GMAIL COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
EUSABETH MALONEY at 727 365 (Name of Contact Person) (Area Code) (Daytime Telep	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingFallahassee, Fl. 323142661 Executive Center Circle	

Tallahassee, Fl. 32301

## Articles of Amendment to Articles of Incorporation

of

## EAST LAKE TEAM 79 KRUNCH ROBOTICS BOOSTERS, INC. (Name of Corporation as currently filed with the Florida Dept. of State)

(Name of Corporation as curren	illy filed with the Florida Dept. of State)
N15000009245	
N 15 00000 9245 (Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
N/A	The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	N/A
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	N/A
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent: 01	A
11/1	4
New Registered Office Address:	(Florula street address)
$N_{i}$	I A Florida N/A (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and accept the obligations of the position.
	gnature 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:

tAttach 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	PT John Doe  V Mike Jones SV Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address		
Change Add Remove	NPD	BRIAN CAMP	1300 SILVER SAGLE DR TARPON SPRINGS FL 34688		
2) Change Add Remove	NED	BONNIE WBAYON	1300 SILUER EAGLE DR TARPON SPRINGS, FL 34688		
3 ) Change Add Remove					
41 Change Add Remove					
5) Change Add Remove					
6) Change Add Remove					

If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)			
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option:	, if other than the
ino more than 90 days after amendment file dates	
	date will not be listed as the
( <u>CHECK ONE</u> )	
	ment(s)
	were
7/2018	
nan or vice chairman of the board, president or other officer-if dir n selected, by an incorporator - if in the hands of a receiver, truste	
(Typed or printed name of person signing)	
	opted by the members and the number of votes cast for the amend.  ers entitled to vote on the amendment(s). The amendment(s) was rs.  7/2018  nan or vice chairman of the board, president or other officer-if dir n selected, by an incorporator - if in the hands of a receiver, truste ppointed fiduciary by that fiduciary)  ABSTH MALONET (Typed or printed name of person signing)