117000001696

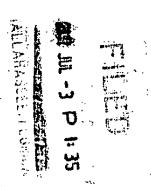
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JUL 1 1 2017
T. LEMHEUX



COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION	Plantation High Sch	ool Band Boosters, I	nc	
	17000001696			
DOCUMENT NUMBER:				
The enclosed Articles of Amen	dment and fee are subm	itted for filing.		
Please return all correspondence	e concerning this matter	to the following:		
Tamara Persad				
	(Name of Contact Pe	rson)	
Plantation High School				
	10.550	(Firm/ Company)	
6901 Northwest 16th Street				
		(Address)		
Plantation, FL 33313				
	(City/ State and Zip (Code)	
Bandparentsphs@gmail.com				
E-m	ail address: (to be used	for future annual rep	ort notification	n)
For further information concern	ning this matter, please c	all:		
Carol Loman		at	954	881-2386
(N	ame of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	owing amount made pay	able to the Florida D	epartment of	State:
■ \$35 Filing Fee E	3\$43.75 Filing Fee & C Certificate of Status	\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Add	rage	Str	oot 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

Plantation High School Band Boosters, Inc	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
N17000001696	
(Document Numb	per 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
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:	N/A
(Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered offi	ce address in Florida, enter the name of the
new registered agent and/or the new registered office a	
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fa	
S	ignature of New Registered Agent, if changin

Page 1 of 4

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 Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	TAMARA PERSAD	1600 NW 128TH DRIVE
Add			APT 303
X Remove			SUNRISE, FL 33323
2) Change	<u>s</u>	NICOLE CORBO	2741 SW 83 TERRACE
Add X Remove			MIRAMAR, FL 33025
3) Change	V	VANESSA BARNES	216 LAKE POINT DRIVE
X Add			#218
Remove			OAKLAND PARK, FL 33309
4) Change X	<u>s</u>	JERLINE BISSAINTHE	2718 NW 68TH WAY
Add Remove			SUNRISE, FL 33313
5) Change			
Add			
Remove			
6) Change	<u></u>		
Add			
Remove			

. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	<u>nere</u> :		
N/A				
				12 142 112 11
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The date of each amendment date this document was signe		_, if other than the
Effective date if applicable:	06/01/2017	
	(no more thun 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members of adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated	9/2017	
Signature	2000 Deur	_
have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
C	AROL LOMAN	
_	(Typed or printed name of person signing)	
В	OARD PRESIDENT	
_	(Title of person signing)	