## N17000002226

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Division of Corporations		•	·••	
North Port H	gh School Orchestra and	Percussion Parent	Organization	·
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee	are submitted for filing.			
Please return all correspondence concerning th	is matter to the following	<b>;</b> :		
Michael Alegria				
	(Name of Contac	et Person)		<u> </u>
	(Firm/ Comp	oany)		
4864 S. Cranberry Blvd				
	(Address	s)		
North Port, FL 34286				
· · · · · · · · · · · · · · · · · · ·	(City/ State and 2	Zip Code)		
nphsoppa@gmail.com				
E-mail address: (to	be used for future annua	report notification	1)	
For further information concerning this matter	please call:			
Lorianne Keeney		931 at	260-7717	
(Name of Contact	Person)	(Area Code)	(Daytime Telepho	one Number)
Enclosed is a check for the following amount	nade payable to the Flori	da Department of	State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Certificate of	Fee & □\$43.75 Filing Status Certified Copy (Additional co- enclosed)	Certif py is Certif	0 Filing Fee icate of Status ied Copy tional Copy is seed)	
Mailing Address		Street Address		

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

North Port High School Orchestra and Percussion Parent Organization, INC

(Name of Corporation as curre	antly Glad with the Floris	la Dant, of Stata)
N17000002226	ently thed with the Florid	ia pept, of state)
(Document Num	nber of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ntes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
North Port High School Orchestra and Percussion Parent As	ssociation, Inc.	The new
name must be distinguishable and contain the word "corpor" (Company" or "Co." may not be used in the name.	ration" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	<u>v</u> )	·1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered of new registered agent and/or the new registered office  Name of New Registered Agent:		ALCONOMIC SECONDARY SECOND
New Registered Office Address:	(Florida street address)	
· 	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	familiar with and accept t	
	Signature of New Registe	red 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 se Jones sy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TREA	Patricia Bruce	3711 Johannesberg Rd
Add			North Port, FL 34288
X Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
,	
-	

The	e date of each amendment(s) adoption:	, if other than th
date	e this document was signed.	
Effe	ective date if applicable: 5   11   7   (no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no ument's effective date on the Department of State's records.	ot be listed as the
Ada	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 8/11/2017	
	Signature	_ <del></del>
	(By the chairman 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)	17 AUG
	Michael Alegria	
	(Typed or printed name of person signing)	70 72 1
	Secretary	7.08H
	(Title of person signing)	1