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(R	Requestor's Name)	
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PICK-UP	WAIT	MAIL
	Business Entity Name)	<u></u>
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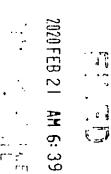
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## **COVER LETTER**

TO: Amendment Section Division of Corporations North Port High School Choral Boosters, Inc. NAME OF CORPORATION: N17000002365 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: David Sommer (Name of Contact Person) North Port High School Choral Boosters, Inc. (Firm/ Company) 6400 W. Price Blvd (Address) North Port, FL 34288 (City/ State and Zip Code) nphschorus1@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Katie Clark (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is

enclosed)

Mailing Address

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

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certified Copy

(Additional Copy is Enclosed)

## Articles of Amendment to Articles of Incorporation of

North Port High School Choral Boosters, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N17000002365 (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: NA 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: Name of New Registered Agent: NA (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 familiar with and accept the obligations of the position, Signature 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	PT         John Do           V         Mike Jo           SV         Sally Sr	<u>ones</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
Change Add  Remove	<u>P</u>	Tami Uecker	6400 W Price Blvd North Port FL 34288	
2) Change Add	<u>v</u>	Kim Peeler	6400 W. Price Blvd North Port FL 34288	
X Remove 3 ) Change	<u>P</u>	Angie Portelli	6400 W. Price Blvd North Port FL 34288	
4) Change * Add	<u>S</u>	Dale Graham	6400 W. Price Blvd North Port FL 34288	
Remove  5)	SVP	Bertha Acosta	6400 W. Price Blvd North Port FL 34288	
6) Change Add				
Remove Page 2 of 4  E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				

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Page 3 of 4	
tage 5 of 4	
The date of each amendment(s) adoption: January 15, 2020 date this document was signed.	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not a document's effective date on the Department of State's records.	oe listed as the
Adoption 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	2/7/2020			
Signature	Kathyn E Clark			
have no	(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)			
	Kathryn E. Clark			
	(Typed or printed name of person signing)			
Treasurer				
	(Title of person signing)			