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JUL 27 2017

R. Vaille

TO: Amendment Section . Division of Corporations

NAME OF CORPORATION: A. Crawford M	osley High School Marine corps Junior orps Bouster Club Inc.
Reserve Officers Training C	orps Bouster Club Inc.
DOCUMENT NUMBER: NITODOOD 6305	
The enclosed Articles of Amendment and fee are submitted	d for filing.
Please return all correspondence concerning this matter to	the following:
Doug Harbison	
(Nai	ne of Contact Person)
•	
A. Crawford Mosley	MCJROTE BOOSTER Club Inc.
'	(Firm/ Company)
521 AA (1) 11 A (1)	
501 Mosley Drive	(Address)
Lynn Haven, Fl. 3244	4
(City	y/ State and Zip Code)
	İ
dbharbison a hotmaile E-mail address: (to be used for	future annual report notification)
	Transfer annual report notification)
For further information concerning this matter, please call:	
	0.00 0.10 9.71.0
(Name of Contact Person)	at 228 219-9262 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida Department of State:
Α)	43.75 Filing Fee & S52.50 Filing Fee ertified Copy Additional copy is nclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
	i dilanasocci i is sesti

Articles of Amendment to Articles of Incorporation

1. Crawford Mostey High School Marine Co (Name of Corporation as currently filed with the	orps Junior Reserve Officers Training G
	e Florida Dept. of State) Booster Club Inc.
200000110	
(Document Number of Corporation	n (if known)
resuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida F</i> nendment(s) to its Articles of Incorporation:	Not For Profit Corporation adopts the following
If amending name, enter the new name of the corporation:	
une must be distinguishable and contain the word "corporation" or "incorporation" or "incorporation" or "incorporation" or "co." may not be used in the name.	b InC. The new porated" or the abbreviation "Corp." or "Inc."
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	
	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office address in FI new registered agent and/or the new registered office address:	orida, enter the name of the
Name of New Registered Agent: NA	
New Registered Office Address:	(Florida street address)
MA (City)	Florida (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and	·
us	
Signature of New	Registered Agent, if changing

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address of each Officer (Attach additional sheets Please note the officer/d P = President; V = Vice	and/or Directs, if necessary, irector title by President: T= = Chief Finant	tor being added: the first letter of the office Treasurer; S= Secretary; I cial Officer. If an officer/d	name of each officer/director being removed and title, name, and title: D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief lirector holds more than one title, list the first letter of each office
	aves the corpo	ration, Sally Smith is name	n Doe is listed as the PST and Mike Jones is listed as the V. There is d the V and S. These should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>V</u> <u>M</u> i	hn Doc ike Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove		<u>N/A</u>	
2) Change Add Remove 3) Change Add			
Remove 4) Change Add Remove		MX	
5) Change Add Remove		MX	
6) Change Add Remove		MA	

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E. If amending or adding additional Articles, enter change(s) here:	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
	-

The date of each amendment(s) adoption: 🖽	, if other than the
ate this document was signed.	
ffective date if applicable: A	
(no more than 90 day:	s after amendment file date)
Note: If the date inserted in this block does not meet the application current's effective date on the Department of State's records.	ble statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the was/were sufficient for approval.	he number of votes cast for the amendment(s)
☐ There are no members or members entitled to vote on the an adopted by the board of directors.	nendment(s). The amendment(s) was/were
Dated 7/19/17 Signature Doug My	
	board, president or other officer-if directors or – if in the hands of a receiver, trustee, or iduciary)
Doug Harbison (Typed or pri	nted name of person signing)
President/Registered	
·	