N17000008807

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	Central Florida FIRST	Robotics Booster, l	nc.	
	N17000008807			
DOCUMENT NUMBER: _				
The enclosed Articles of Ame	endment and fee are submi	tted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
	н	aleigh Williams		
	()	Name of Contact Pe	rson)	
		RENOSI, Inc.		
		(Firm/ Company)	
	3554 W Orang	e Country Club Dr.	Suite 140	
· · · · · · · · · · · · · · · · · · ·		(Address)		· · · · · · · · · · · · · · · · · · ·
	Winte	er Garden, FL 3478	7	
	(1	City/ State and Zip (Code)	<u> </u>
	south	east@myrenosi.con	n	
Е	-mail address: (to be used f	or future annual rep	ort notification)
For further information conc	erning this matter, please c	all:		
Haleigh Williams		ni.	407	614-0103
	(Name of Contact Person)	"	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida I	Department of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status		Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is used)
Mailing A Amendme		<u>St</u> Ar	reet Address nendment Sect	ion

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

Central Florida FIRST Robotics Booster, Inc.

irrently filed with the Flo 117000008807		
Number of Corporation (if	known)	
tatutes, this Florida Not F	or Profit Corporation ado	pts the following
ooration:		
		The new
ESS)	a or me door evaluation.	
		19 ALC
d office address in Florid fice address:	a, enter the name of the	JUL 15
<u> </u>		
	Florida street address)	7: 08
	, Florida _	
(City)	(Zip Ce	ode)
tered Agent: am familiar with and acce	pt the obligations of the po	sition.
	tatutes, this Florida Not F poration: ESS) d office address in Florid fice address: (City) tered Agent:	d office address in Florida, enter the name of the fice address: (Florida street address) (City) (Zip Co.

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove			
4) Change			
Remove 5) Change Add			
6) Change Add	***		
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
Amending Article II Purpose to read:	
The primary purposes of the corporation are to encourage and support Christian homeschool families by providing	
educational programs and opportunities to connect and create community, as well as support the students, parents, and	l
mentors of STEM Robotics.	
	_
	-

The	date of each amen	dment(s) adoption:	, if other than the
iate	this document was	signed.	
Effe	ective date <u>if applic</u>	able:	_
		(no more than 90 days after amendment file	date)
		d in this block does not meet the applicable statutory filing reque on the Department of State's records.	irements, this date will not be listed as the
Ado	option of Amendme	nt(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for approval.	for the amendment(s)
	There are no membadopted by the box	ers or members entitled to vote on the amendment(s). The amerd of directors.	ndment(s) was/were
	Dated	07/11/2019	
	Signature	Mike Benn	
	(By the chairman or vice chairman of the board, president or oth have not been selected, by an incorporator – if in the hands of a other court appointed fiduciary by that fiduciary)	
		Mike Benn	
		(Typed or printed name of person sig	ning)
		President	
		(Title of person signing)	