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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SDSHS BUCCANCER Band Booster, Inc.
DOCUMENT NUMBER: N 1800000 6673
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sarah Cordero (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
28401 SW 167th Ave \$ (Address)
(Address)
Homestead, FL 33070 (City/ State and Zip Code)
Sarah Cordero e dade schools, net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sa(ah Cordero at 786 299 - 2363 (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 Set 19843.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Street Address Amendment Section
Division of Corporations Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

A. If amending name, enter the new name of the corporation: The new 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: Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: New Registered Agent's Signature, if changing Registered Agent:	Name of Corporation as currently filed with the Florida Dept. of State)
(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: The new 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: Name of New Registered Agent: Sa(ah Cordero 28401 SW 1657 H. Aw New Registered Office Address: New Registered Office Address: New Registered Office Address: City) Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	N1800000 6673
A. If amending name, enter the new name of the corporation: The new 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: Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent; New Registered Agent's Signature, if changing Registered Agent;	
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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: New Registered Office Address: New Registered Office Address: New Registered Office Address Horida Florida	
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: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: New Registered Agent's Signature, if changing Registered Agent:	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.
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: New Registered Office Address: New Registered Office Address: New Registered Office Address Florida 33030	B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
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:	
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Name of New Registered Agent: New Registered Office Address: New Registered Office Address: 167	C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: 167	
Name of New Registered Agent: Name of New Registered Agent: New Registered Office Address: Manuel of New Registered Agent: Safah Cordero	
Name of New Registered Agent: Name of New Registered Agent: New Registered Office Address: Manuel of New Registered Agent: Safah Cordero	The idea of the control of the contr
New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: (Florida street address) (City) (Florida street address) (City) (Zip Code)	
New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: (Florida street address) (City) (Florida street address) (City) (Zip Code)	Name of New Registered Agent: Salah Coldero
Homestead, Florida 33030 (City), (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	28401 SW 167th AVE
Homestead, Florida 33030 (City), (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	(Florida street address) New Registered Office Address:
New Registered Agent's Signature, if changing Registered Agent:	
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.	(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	Significance of Name Pagintaged Against if abanquing

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	$\overline{\underline{V}}$ $\overline{\underline{Mik}}$	n Doe te Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	1	Heather Mehling	35055 SW 214th Ave Homestead, FL 33034
Remove 2) Change Add	<u>S</u> _	Jayme Hall	20562 SW 3245+ Homestead, FL 32030
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or add (attach additional sh	ding additional neets, if necessar	Articles, enter change(s) here: y). (Be specific)	

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The date of each amendment(s) adoption:date this document was signed.	November November	15,2023	, if other	than the
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				12 17 13
				5.3 E.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 1115/2023				
Signature				
(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)				
Tatricia Agosto (Typed or printed name of person signing)				
President				
(Title of person signing)				