

N180000008356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

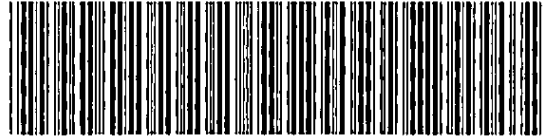
(Business Entity Name)

(Document Number)

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2019 NOV -4 PM 5:32  
TALLAHASSEE, FL

NOV 04 2019

C. Kinas



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 28, 2019

GAYNOR BROCK EDGAR  
1240 SANCTUARY DR  
OVIEDO, FL 32766

SUBJECT: CHILES MUSIC BOOSTER ASSOCIATION INC  
Ref. Number: N18000008356

We have received your document for CHILES MUSIC BOOSTER ASSOCIATION INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please only check one box for the amendment of adoption.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Wood  
Regulatory Specialist II

Letter Number: 619A00017853

RECEIVED  
2019 NOV 14 5:12:55  
DIVISION OF CORPORATIONS

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Chiles Music Booster Association Inc

DOCUMENT NUMBER: N18000008356

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gaynor Brock-Edgar  
Name of Contact Person

Firm/ Company

1240 Sanctuary Drive  
Address

Oviedo, FL 32766  
City/ State and Zip Code

brockedgar@yahoo.co.uk  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gaynor Brock-Edgar at (407) 953-9272  
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:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|--|---|---|--|

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

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

Articles of Amendment  
to  
Articles of Incorporation  
of

Chiles music Booster ASSociation Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

N18000008356

(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 in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Garnor Brock Edgar

1240 Sanctuary Drive

(Florida street address)

New Registered Office Address:

Oviedo

(City)

Florida

(Zip Code)

32766

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.*

Garnor Brock Edgar

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:**

☒ Change      PT      John Doe

☒ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

Type of Action  
(Check One)

Title

Name

Address

- |   |           |                           |  |
|---|-----------|---------------------------|--|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove            | <u>T</u>  | <u>Chelsea Kaplan</u>     | <u>2320 Sterling Creek Pkwy</u><br><u>Oviedo, FL 32766</u> |
| 2) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove            | <u>T</u>  | <u>Emily Willadsen</u>    | <u>3028 Juneberry Terr</u><br><u>Oviedo, FL 32766</u>      |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove            | <u>P</u>  | <u>Allison Ramsey</u>     | <u>3530 Diamond Leaf Ln</u><br><u>Oviedo, FL 32766</u>     |
| 4) <input checked="" type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>P</u>  | <u>Gaynor Brock-Edgar</u> | <u>2710 Willow Drop Way</u><br><u>Oviedo, FL 32766</u>     |
| 5) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove            | <u>VP</u> | <u>Marta Negrón</u>       | <u>2469 Huntingdale Lane</u><br><u>Oviedo, FL 32765</u>    |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove                       | _____     | _____                     | _____  |

[illegible]

The date of each amendment(s) adoption: AUGUST 16<sup>th</sup>, 2019, if other than the date this document was signed.

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 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 AUGUST 16<sup>th</sup>, 2019

Signature Gaynor Brock-Edgar  
(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)

GAYNOR BROCK-EDGAR  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)