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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: KIVER VIEW High School NJROT & BOS
DOCUMENT NUMBER: N18000009102 Club, 11
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jennifer Luttell (Name of Contact Person)
Treasurer (Firm/ Company)
12232 Fairlawn Dr. (Address)
Riverview, FL 33579 (City/State and Zip Code)
The solution of the solution o
For further information concerning this matter, please call:
Jennifey Luttrell at 574-303-7285 (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
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

to

Articles of Incorporation of

Riverview High School NJROTC Booskir Clu	36 INC.
(Name of Corporation as currently filed with the Florida Dept. of State)	1
COLOGODO 20114	
NIX0UUUUJ	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adoainendment(s) to its Articles of Incorporation:	opts the following
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 "Company" or "Co." may not be used in the name.	Corp." or "Inc."
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)	
The state of the s	
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: Lennifer Luttell	
12232 Fair lawn Dr	·
(Florida street address)  New Registered Office Address:	
Men Registered Office Address.	225 76
Y VLV VIW Florida, Florida, Florida, Zip Co	<u> 335 円</u> ode)
(-14)	,
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 po-	osition,
Jennyly Rett	the
Signature of New Registerled 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 D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	Roy Agent	Jennifer Coul	12314 Bramfield Da River VIII 33579
Remove  2) Change Add	Resident	Lovic Loy	11581 Westen Course
Remove 3) Change Add Remove	Trainer	Franker Clara.	Riverview, FL 33579
4) Change	Triasurer	Jennifer Luttell	12232 Farlow, Di
Remove  5) Change Add	President	blance Staub 17	PIVERVIEW, FL 33579  RIVERVIEW, FL 335 79
Remove 6) Change Add			
Remove  E. If amending or a	adding additional Art	icles, enter change(s) here:	
	sheets, if necessary).		

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The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date if applicable:		
(no	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does it document's effective date on the Department	not meet the applicable statutory filing requirement of State's records.	ts, this date will not be listed as the
•	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the	amendment(s)

There are no memi adopted by the box	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	10/18/2000
Signature	Service Mittely
(	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)
	_ Prinfer pathell
	(Typed or printed name of person signing)
	TIEGSLICEV
	(Title of person signing)

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