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COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

Hudson High Scho NAME OF CORPORATION:	ol Touchdown Booste	er Club Inc	
N18000009998 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subt	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
Timothy Hicks			
	(Name of Contact Pers	on)	·
Hudson High School Touchdown Booster Club Ir	nc		
	(Firm/ Company)		
PO Box 6871			
	(Address)		
Hudson, Florida 34674			
	(City/ State and Zip Co	de)	
hhstouchdownclubinc@gmail.com			
E-mail address: (to be used	for future annual repor	t notificatio	n)
For further information concerning this matter, please	call:		
Daniela G Coleman		27	534-3892
(Name of Contact Person)	at at	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Dej	partment of	State:
■ \$35 Filing Fee	□\$43,75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section		t Address idment Sect	ion
Division of Corporations		iament Sect ion of Corp	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Hudson High School Touchdown Booster Club Inc

2019 FEB - 4 PH 3: 33

	IUD IIIC			111 0 00
(Name of Corporation	un as curre	ently filed with the F	lorida Dept, of State)	: CF STATE
N18000009998			TALLA IA	SSEE. FL
(Doc)	ument Num	nber of Corporation (i	ť known)	
Pursuant to the provisions of section 617.1006, FI amendment(s) to its Articles of Incorporation:	lorida Statu	ites, this <i>Florida Not</i>	For Profit Corporation	adopts the following
A. If amending name, enter the new name of the N / A	he corpora	ntion:		
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nun	rd "corpor ne.	ation" or "incorpora	ted" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)	able: ADDRESS	N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or registered.	istered offi	N / A	a, enter the name of the	
new registered agent and/or the new register	red office :	address:		
Name of New Registered Agent:	Daniela	G Coleman		
	13541 G	arris Drive		
New Registered Office Address:		(Florida street address)	
	Hudson		, Florida	34667
		(Ciny)	(Zip (Code)
iew Registered Agent's Signature, if changing f hereby accept the appointment as registered agen	n. I am fa	miliar with and accep		2
	Si	ignature of New Regi	stered 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> te Jones y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Shannon Eva	10815 Peter Ave
Add		,	Hudson, FL 34667
XX Remove			
2) Change	Τ	Michelle Anderson	9639 Eden Ave
Add			Hudson, FL 34667
xx Remove			
3)Change	VP	Scott Schull	18443 Dobson Dr
xx Add			Hudson, FL 34667
Remove			
4) Change	Т	Daniela G Coleman	13541 Garris Dr
xx Add			Hudson, FL 34667
Remove			
5) Change			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articular (attach additional sheets, if necessary).	(Be specific)
N	
N/A	

•	01-29-19
The date of each amendment(s) ad late this document was signed.	option:, if other than the
_	9-19
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo locument's effective date on the De	ek does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes east for the amendment(s)
There are no members or membadopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was/were
01-29-19 Dated	
Signature	tish eller
have not bee	nan or vice chairman of the board, president or other officer-if directors n selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)
Steve W	lliams
	(Typed or printed name of person signing)
Presiden	
	(Title of person signing)