## N180000 11306

(	Requestor's Name)	
	Address)	
	Address)	
	City/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
	Business Entity Nam	e)
	(Document Number)	
Certified Copies	Certificates	of Status
Special Instructions	to Filing Officer:	
mond	form,	4082
5	Office Use Only	/



500329377945

05/24/19--01007--001 \*\*05.00

TO THE 18 AMILE 39

JUL 2.9 2019

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME	of Corporation: <u>German -</u>	American School	of PTO Corp	
DOCU	MENT NUMBER: N18 0000 113	06		
The enc	losed <i>Articles of Amendment</i> and fee are su	bmitted for filing.		
Please r	eturn all correspondence concerning this ma	tter to the following:		
Ais	lin Gerlach			
	4011101	(Name of Contact Perso	n)	
	man-American School	Pro Corp (Firm/ Company)		
420	10 N. 65th Auc	(Address)		
Dau	ie, FL 33024	(,		
		(City/ State and Zip Cod	le)	erenta de Co
ger	man Schoolfloto@gma: E-mail address: to be us	l. Com	notification)	
				-ā
	her information concerning this matter, pleas	se can.	6 78 - 702 - 205 7 rea Code) (Daytime Telephor	2
1110	inn Gerlach (Name of Contact Perso	on) atat	rea Code) (Daytime Telephor	ne Number)
	d is a check for the following amount made			ć.
X	Certificate of Status  Filing Fee has  Wrendy been Processed.  Please See attached letter  Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327	s Certified Copy (Additional copy is enclosed)  Street Amen- Divisi Cliffor	Certificate of Status Certified Copy (Additional Copy is Enclosed)  Address dment Section on of Corporations n Building	
	Tallahassee, FL 32314	2661 1	Executive Center Circle	

Tallahassee, FL 32301



June 12, 2019

AISLINN GERLACH GERMAN-AMERICAN SCHOOL PTO 4200 N. 65TH AVE DAVIE, FL 33024

SUBJECT: GERMAN-AMERICAN SCHOOL PTO CORP.

Ref. Number: N18000011306

We have received your document for GERMAN-AMERICAN SCHOOL PTO CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Profit Corporation, but your entity is a Non-Profit Corporation. Please complete and return the enclosed blank form(s).

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.

Diane Cushing Senior Section Administrator

Letter Number: 019A00011808

2019 JUL 19 PH12: 41

## Articles of Amendment to Articles of Incorporation of

	PTO CO	— <del></del> -		· · <del>-</del>		
(Name of Corporation	as currently	<u>g filed w</u>	<u>fith the Fl</u>	orida Dept.	of State)	
N180000 11 306						
(Docum	nent Number	of Corp	oration (11	known)		
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes.	this Flo	rida Not i	For Profit C	<i>orporation</i> ado	pts the following
A. If amending name, enter the new name of the	corporation	<u>1:</u>				
		<del></del>	· <del>-</del>			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		n'' or ''	incorpora	ed" or the c	ubbreviation "C	lorp." or "Inc."
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET AL		<del></del>	<del> </del>		<u> </u>	
	_					<del></del>
	_					
C. Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE E	<u>30X</u> ) _					<u> </u>
						<b>72</b>
	_	•	••		<del></del>	<del>ာ</del> ယ
	-		<del></del> -	<del></del>		
D. If amending the registered agent and/or registered agent and/or the new registered.			in Florid	a, enter the	name of the	₹
Name of New Registered Agent:	Aistin		erlach			
	4200	N.	65 44	Auc		
New Registered Office Address:				(Florida street	uddress)	
New Registered Office Address.						27.04
	- 0	au.e			, Florida _	
		(City)			(Zip Co	'av)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent			and acce	pt the oblige	ations of the po	sition.
	as	lun	gu	lel_		
_	Sigi	nature o	f New Reg	istered Agei	it, 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	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	<u> </u>	A:slinn Gerlach	4200 N. 65th Auc
Add			Davie, FC 33024
Remove			
2) Change	<del></del>		No.
Add			
Remove			
3 ) Change	·· F55		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(Change			
6) Change	<del></del>		
Add			
Remove			

. <u>If amending or adding a</u> (attach additional sheets, i	f necessary). (	Be specific)			
N/A					
<u> </u>				<u>-</u>	
· · · · · · · · · · · · · · · · · ·					
			701		
	·-·				
				··	
/··					
	<del></del>				
····	<u> </u>				
				<del></del>	
				<del></del>	
			<u>.</u>		
17 - 2 - 3				<del></del>	
					<del> </del>
	<del></del>	<del>, ,,</del>	<del></del>		
					<del></del>

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date w Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(soval.	;)
There are no members or me adopted by the board of dire	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.	
Dated	7/16/19	
Signature	MILI	
have pot	airman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or rt appointed fiduciary by that fiduciary)	
-	James N Frank	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	