## N19000005672

(Requi	estor's Name)	
(Addre	ss)	<del></del>
(Addre	ss)	
(City/S	tate/Zip/Phon	e #)
	_	_
PICK-UP	WAIT	MAIL
(Busin	ess Entity Na	me)
(Docur	nent Number	)
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer:	
Opecial matructions to 7 mil	ng Omcer.	





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## COVER LETTER

**FO:** Amendment Section Division of Corporations

, ,

NAME OF CORPORATION: _	DHS Mens	Basket	ball Booster Club, In
DOCUMENT NUMBER:	N190000	05678	2
The enclosed Articles of Amendm	ent and fee are submitted	for filing.	
Please return all correspondence c	oncerning this matter to t	he following:	
Da	sialle Car	, ( <u>1</u>	
	nielle Case	ne of Contact Perso	on)
	Basketball E		
10055	SW 180+	AVLNU-	e Road
Dunnell	on Fu	3443 2 State and Zip Cod	de)
	dhsbus	Ketballo uture annual report	athletics egmail.com
For further information concerning	this matter, please call:		
Danielle (Name	ascupe of Contact Person)		35 2 · 78 9 · 86 O5 rea Code) (Daytime Telephone Number)
Enclosed is a check for the following	ng amount made payable	to the Florida Dep	partment of State:
\$35 Filing Fee S4.	(Ac	i.75 Filing Fee & nified Copy Iditional copy is closed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Addres Amendment Sec	tion	Ameno	Address dment Section

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

,	Articles of Amendment to		11.5	2624
А	rticles of Incorporation of			<u></u> :-
NIC MAR BACKET		Club To	, (·	: =
Name of Corporation as currently filed with the Flo	-ball Booster	Club, Inc		
N 1900000 51.7	\		; <del>_</del> ·	Ξ.
Document I	★ Number of Corporation (if known)			- 5 - 6: 5
	•		¥.:'	_
Pursuant to the provisions of section 617.1006, Florida 5 amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not For P</i>	rofit Corporation adopts the	e followir	ng
A. If amending name, enter the new name of the cor	poration:			
DHS Baskerball Athle	tics Booster	Club. Inc.	The ner	W.
name must be distinguishable and contain the word "con				•
"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 ADDR	NIA			_
(Trincipal office datatess arost be A STREET ADDR				_
	-		_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MIA			
	, <u> </u>			-
			_	
	****	_ ·	<del> </del>	-
D. If amending the registered agent and/or registered	d office address in Florida, en	ter the name of the		
new registered agent and/or the new registered of	Tice address:			
Name of New Registered Agent:	NIA_			_
	. , , ,			
	(Florid	a street address)		-
New Registered Office Address:				
		, Florida (Zip Code)	<u></u>	-
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Regist		in a second		
I hereby accept the appointment as registered agent. I a	um jamiliar with and accept the	obugations of the position.		
	NIA			
	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: X Change X Remove X Add	PT         John D           V         Mike J           SV         Sally S	ones 1	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
t) Change Add	Pres	Antonio Muldanado	Dunnellon fr 3443d
Remove  2) ChangeX _Add.	Pies	Nicole Turner	10055 SW180Th Ave B Dunnellon fr 34432
3 ) Change Add Remove	vP_	Christine Muldanudo	Dunnellon FC 3443 2
4) X Change Add.	νP	Danielle Casey	10055 SW 180 Ave Rd Dunnellon AL 34432
75) X Change. Add	Sec	Belinda Williams	10055 SW 180 Ave Rd Dunnellon Fil 34432
Remove 6) Change Add			
Remove  E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
	-		

NIA	
The date of each amendment(s) adoption: Une 26,2024 date this document was signed.  Effective date if applicable:  (no more than 90 days after amendment file date)	, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	e listed as the
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.	

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