

N1900000 7347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

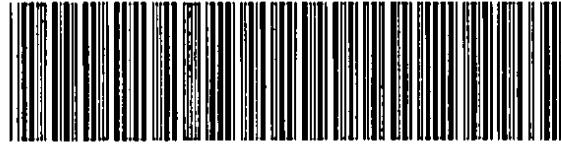
(Business Entity Name)

(Document Number)

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FILED  
2020 JAN 16 AM 11:55  
SEC. OF STATE  
TALLAHASSEE, FL

JAN 15 2020  
C Kinsey



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 18, 2019

TOMEKA NAPPER  
100 COMMODORE DR #526  
PLANTATION, FL 33325

SUBJECT: THE MARCHING COLONELS BAND BOOSTER ASSOCIATION,  
INC.  
Ref. Number: N19000007547

We have received your document for THE MARCHING COLONELS BAND BOOSTER ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the type of action for Sandra Petty. Check either change or remove.

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: 919A00025752

RECEIVED  
2020 JAN 16 AM 10:26

**COVER LETTER**

Office of  
Division of Corporations

NAME OF CORPORATION: THE MARCHING COLONELS BAND BOOSTER ASSOCIATION, INC.

DOCUMENT NUMBER: N19000007547

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

Please return all correspondence concerning this matter to the following:

OMEKA NAPPER  
(Name of Contact Person)

VIJEN ENTERPRISES CORPORATION  
(Firm/ Company)

100 COMMODORE DRIVE, #526  
(Address)

TALLAHASSEE, FL 32301  
(City/ State and Zip Code)

management@vijienenterprises.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OMEKA NAPPER at 754 800-5372  
(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 checked="" type="checkbox"/> \$35 Filing Fee | <input 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 is<br>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

THE MARCHING COLONELS BAND BOOSTER ASSOCIATION, INC.

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

819000007547

(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:

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.

Enter new principal office address, if applicable:

Principal office address MUST BE A STREET ADDRESS

100 Commodore Dr #526  
Plantation FL 33325

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

(Florida street address)

\_\_\_\_\_, Florida  
(City) (Zip Code)

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.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
<input type="checkbox"/> Change	<u>S</u>	<u>SANDRA PETTY</u>	<u>2001 NW 2ND COURT</u>
<input type="checkbox"/> Add			<u>BOYNTON BEACH, FL 33435</u>
<input checked="" type="checkbox"/> Remove			
<input type="checkbox"/> Change	<u>S</u>	<u>DR. CHRISTINE MUELLER</u>	<u>8691 NW 24TH STREET</u>
<input checked="" type="checkbox"/> Add			<u>SUNRISE, FL 33322</u>
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific) |

the date of each amendment(s) adoption: \_\_\_\_\_, 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

10/30/19

Signature

(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)

TOMEKA NAPPER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)