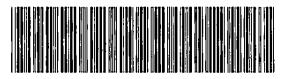
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	William H. Turner	Cechnical Arts High	School Alumn	i Association INC.	
DOCUMENT NUMBER:	N19000010559				
The enclosed Articles of An	nendment and fee are sub	mitted for filing.			
Please return all correspond	lence concerning this matt	er to the following:			
Barnaby Eli Robles					
		(Name of Contact	Person)		
William H. Turner Technic	al Arts High School Alun	nni Association INC			
		(Firm/ Compa	ny)		
11570 SW 13th Lane					
		(Address)			· · · · · · · · · · · · · · · · · · ·
Pembroke Pines, FL 33025					
		(City/ State and Zi	p Code)		
	E-mail address: (to be used	d for future annual r	eport notificati	on)	
For further information con	cerning this matter, please	e call:			FO .
Barnaby Robles		,	(305)	691-8324	
	(Name of Contact Persor		(Area Code)	(Daytime Telepho	ne Number)
Enclosed is a check for the	following amount made p	ayable to the Florid	a Department o	f State:	
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	Cert ris Cert (Add	50 Filing Fee ificate of Status ified Copy litional Copy is losed)	OF STATIONS

Mailing Address

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

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

Articles of Amendment to Articles of Incorporation of

William H. Turner Technical Arts High School Alumni Association Inc.

\$19000010559		
	nt Number of Corporation (if known)	
(Document	a Number of Corporation (if known)	
arsuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Profit Corporation adopts the	followin
. If amending name, enter the new name of the co	orporation:	
		The new
me must be distinguishable and contain the word "company" or "Co." may not be used in the name.	corporation" or "incorporated" or the abbreviation "Corp." o	or "Inc."
Enter new principal office address, if applicable	<u> </u>	
rincipal office address MUST BE A STREET ADL		
		_
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Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	DV 1	
(Studing univess MAT BE A FOST OFFICE BO		-
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	red office address in Florida, enter the name of the	<u> </u>
If amending the registered agent and/or register new registered agent and/or the new registered		<u> </u>
new registered agent and/or the new registered		-
new registered agent and/or the new registered	office address:	
new registered agent and/or the new registered		-
new registered agent and/or the new registered Name of New Registered Agent:	office address: (Florida street address)	
new registered agent and/or the new registered Name of New Registered Agent:	office address: (Florida street address), Florida	
new registered agent and/or the new registered Name of New Registered Agent:	office address: (Florida street address)	F-)
new registered agent and/or the new registered Name of New Registered Agent: New Registered Office Address: www. Registered Agent's Signature, if changing Reg	(Florida street address) , Florida, City) (Zip Code)	F: 7
new registered agent and/or the new registered Name of New Registered Agent: New Registered Office Address: www. Registered Agent's Signature, if changing Reg	(Florida street address)	
new registered agent and/or the new registered Name of New Registered Agent: New Registered Office Address: www. Registered Office Address:	(Florida street address) , Florida, City) (Zip Code)	٠,٠
new registered agent and/or the new registered Name of New Registered Agent: New Registered Office Address: www. Registered Office Address:	(Florida street address) (Florida street address) Florida, Florida, (City) (Zip Code) Sistered Agent: I am familiar with and accept the obligations of the position.	2.75
new registered agent and/or the new registered Name of New Registered Agent: New Registered Office Address: www. Registered Agent's Signature, if changing Reg	(Florida street address) , Florida, City) (Zip Code)	ر. د .
new registered agent and/or the new registered Name of New Registered Agent: New Registered Office Address: cw Registered Agent's Signature, if changing Reg	(Florida street address) (Florida street address) Florida, Florida, (City) (Zip Code) Sistered Agent: I am familiar with and accept the obligations of the position.	:HRV 12 2.7 C
new registered agent and/or the new registered Name of New Registered Agent: New Registered Office Address: cw Registered Agent's Signature, if changing Reg	(Florida street address) (Florida street address) Florida, Florida, (City) (Zip Code) Sistered Agent: I am familiar with and accept the obligations of the position.	2.75

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 I Y Mike J SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3)Remove Add Remove			
4) Change Add			
Remove			
5) Change Add		•	
Remove			
б) Change Add			
E. <u>If amending or addi</u> (attach additional she		Page 2 of 4 <u>ticles, enter change(s) here</u> : (Be specific)	
Article III		·	
The organization is organized	d exclusively for chari	table, and educational purposes under section 501(c)3	of the Internal Revenue Code, or
corresponding sections of an	y future federal tax co	ode.	

Article VIII
Upon the dissolution of this organization, assets shall be distributed to one or more exempt purposes
within the meaning of section 501(c)3) of the Internal Revenue Code, or corresponding section of any
future federal tax code, or shall be distributed to the federal government, or to a state or local government
, for a public purpose.
Page 3 of 4
02/06/2020
The date of each amendment(s) adoption:
Effective date if applicable: 03/(01/2020
(no more than 90 days after amendment file date) Note: If the data invested in this blook days not most the applicable statutors. Gling requirements, this data will not be listed as the
<u>Note:</u> 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.

	02/06/2020
Dated	
Signature	(Ishly Pake
	(By the chairman or vice chairman of the board, president or other officer-if director
	have not been selected, by an incorporator - if in the hands of a receiver, trustee, or
	other court appointed fiduciary by that fiduciary)
	Ashley Blake
	(Typed or printed name of person signing)
	(Typed or printed name of person signing) President