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SECNETARY OF STATE
TALLAHASSEE, FLORID

NOV 0 2 2018 S. YOUNG

## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: International Gold Cymnustics Booster Club DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) illage Sch Blud +2 Tallahassee, FL 32317 E-mail address: (to be used for future annual report potification) For further information concerning this matter, please call: Julie Malinger at 443 (180 5555)
(Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy □\$52.50 Filing Fee Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

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

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to

International Gold (Name of Corporation as curre	Gymnast	Lics Booster Club In
(Name of Corporation as curre	2 // 2	rida Dept. of State)
	215 42	
(Document Nun	nber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ites, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
		774
name must be distinguishable and contain the word "corpor" Company" or "Co." may not be used in the name.	ration" or "incorporated	The new d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	$\underline{S}$ )	·
		<u> </u>
C. Enter new mailing address, if applicable:		المريع
(Mailing address MAY BE A POST OFFICE BOX)		
		RE O
		25. 1
D. If amending the registered agent and/or registered of		enter the name of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:		
	(Fi	lorida street address)
New Registered Office Address:		
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere		
I hereby accept the appointment as registered agent. I am j	familiar with and accept	the obligations of the position.
	Signature of New Regist	tered daent if changing
	menume of them hegist	area agent, ij enunging

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.

Mike Jones, V as Remo	ve, and Sally Smi	th, SV as an Add.	
Example: X_Change X_Remove X_Add	V Mike	Doe 2 Jones 7 Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change Add Remove	1	Deanna Wheatley	1415 Timberlane Rd #501 Tallabassee, Fl 32312
2) Change		PAmy Nation	1390 Village Squarei3lud
Remove 3 ) Change Add	<u>P</u>	Julie Mallinger	Tallahasser, FC 30317 944 Gentian C+ Tallahasser FC 32312
Remove  4) Change Add  Remove	P	Ellen Clancy	3763 Longchamp Tallahisse FL 32309
5) Change Add		Hollie Hershaw	200 Thomberg Drive Tallahussee, Fe 32312
Remove 6) Change Add	5	Jackie Parker	11026 Wildlife Trail Tallahassee, FL 32312
Remove		Page 2 of 4	

E. If amending or adding additional Ar (attach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) ad	option:	8-99-18	, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :		8-22-18	
	(no more than 90 day	ys after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep		able statutory filing requirements, t	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
☐ The amendment(s) was/were ad was/were sufficient for approva		the number of votes cast for the an	nendment(s)
There are no members or membadopted by the board of directed	pers entitled to vote on the a	mendment(s). The amendment(s)	was/were
Dated	-27-18		
Signature	ellie Hensk		
have not bee		board, president or other officer-itor — if in the hands of a receiver, to the fiduciary)	
	Hollie (Typed or pr	Henshan inted name of person signing)	
	, <b>, , , , , , , , , , , , , , , , , , </b>		
	Tre	asurer	
	(*	Title of person signing)	