N22 UC	0006689
(Requestor's Name)	
(Address) (Address)	200392770152
(City/State/Zip/Phone #)	
(Business Entity Name)	08/22/2201011028 ***35.00
(Document Number) Certified Copies Certificates of Status	
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TO: Amendment Section Division of Corporations	
St Jude's Renegades Marching NAME OF CORPORATION:	
N22000006689 DOCUMENT NUMBER:	<u> </u>
The enclosed Articles of Amendment and fee are submitted for	filing.
Please return all correspondence concerning this matter to the t	following:
Shirlene Murdock	
(Name o	f Contact Person)
(Fin	m' Company)
4275 NW 89th Ave	
	(Address)
Coral Springs, FL 33065	
(City/ St	ate and Zip Code)
stjmb.alumni@gmail.com	
E-mail address: (to be used for futur	e annual report notification)
For further information concerning this matter, please call:	
Shirlene Murdock	954 993-0290
(Name of Contact Person)	at(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Certificate of Status Certifi	Filing Fee &S52.50 Filing Feeed CopyCertificate of Statusional copy isCertified Copy
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

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St Jude's Renegades Marching Band Alumni Inc.

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
N22000006689		
(Document Numb	er of Corporati	on (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida</i>	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	<u>ion:</u>	
n/a		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incor	
B. Enter new principal office address, if applicable:	n/a	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	· · · · · · · · · · · · · · · · · · ·
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	n/a	
(making waters <u>MAT BE A POST OFFICE DUA</u>)		· -
D. If amending the registered agent and/or registered offic	e address in F	Jorida, enter the name of the
new registered agent and/or the new registered office a		
Name of New Registered Agent:		
	· · · · · ·	(Florida street address)
<u>New Registered Office Address</u> :		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent. I am fai		accept the obligations of the position.

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.

<u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John D</u> <u>V</u> <u>Mike Jo</u> <u>SV</u> <u>Sally S</u>	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
I) Change Add		n/a	
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			

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

ADD ARTICLE:

The organization is organized exclusively for charitable and educational purposes under Section 501c3 of the Internal

Revenue Code.

Upon the dissolution of this organization, assets shall be distributed for one or more exempt purpose under 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.

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_____, if other than the

Effective date if applicable:

(no more than 90 days after amendment file date)

<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.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

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07/24/2022 Dated 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)

Shirlene Murdock

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(Typed or printed name of person signing)

Secretary

(Title of person signing)