

N96 000000 5936

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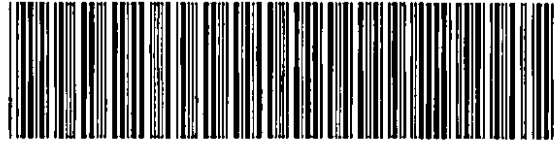
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Dr. Henry E. Perrine Academy of The Arts PTA

DOCUMENT NUMBER: N96000005936

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

Please return all correspondence concerning this matter to the following:

Kelley Augi

(Name of Contact Person)

Dr. Henry E. Perrine Academy of the Arts PTA

(Firm/ Company)

8851 SW 168 street

(Address)

Palmetto Bay, FL 33157

(City/ State and Zip Code)

perrineaotapta@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kelley Augi

305

484-1709

at

(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:

☒ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
Enclosed)

**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

DR. HENRY E. PERRINE ACADEMY OF ARTS, PTA, INC  
(Name of Corporation as currently filed with the Florida Dept. of State)

N96000005936

(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:

A. 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.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. 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:

\_\_\_\_\_  
(Florida street address)

New Registered Office 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

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:

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

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>P</u>	<u>Kelley Augi</u>	<u>8231 SW 205 Street</u> <u>Cutler Bay FL 33189</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>V</u>	<u>Ashley Jones</u>	<u>18121 SW 84 AVE</u> <u>Palmetto Bay FL 33157</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Michelle Craven</u>	<u>8305 SW 205 Terrace</u> <u>Cutler Bay FL 33189</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>V</u>	<u>Cassandra Pino Lopez</u>	<u>11532 SW 248th Lane</u> <u>Homestead, FL 33032</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Shauntel Frater</u>	<u>17800 SW 110th Ct</u> <u>Miami, FL 33157</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>S</u>	<u>Lisa Sanchoo</u>	<u>8625 SW 188 street</u> <u>Cutler Bay FL 33157</u>

F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

7. Remove T Melissa Kelly 16150 SW 87 Ct  
Miami FL 33157

8. Add T Danielle Palacios 8740 SW 182 Terrace  
Palmetto Bay FL 33157

9. Remove V Russell Jones 18121 SW 84 Ave  
Palmetto Bay FL 33157  
10. Remove V Michael Dillon 1812 SW 94 Ct  
Palmetto Bay FL 33157

The date of each amendment(s) adoption: 08/3/2022, if other than the date this document was signed.

Effective date if applicable: 08/03/2022  
(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.

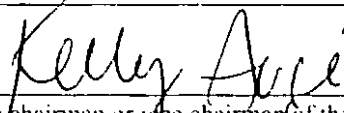
Adoption of Amendment(s) (CHECK ONE)

- ☒ 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 08/03/2022

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)

Kelley Augi

(Typed or printed name of person signing)

President

(Title of person signing)