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N00000008325

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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Hallandale Beach Yankees Youth
Baseball Club, Inc.

DOCUMENT NUMBER: N00000008325

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

Please return all correspondence concerning this matter to the following:

Sharon Leech

(Name of Contact Person)

Rosenthal Rosenthal Rasco

(Firm/ Company)

2875 NE 191 Street, # 500

(Address)

Aventura, Florida 33180

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Sharon Leech

(Name of Contact Person)

at (305) 937-0300

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$35 Filing Fee



\$43.75 Filing Fee &
Certificate of Status



\$43.75 Filing Fee &
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\$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
409 E. Gaines Street
Tallahassee, FL 32399

Hallandale Beach Yankees Youth Baseball Club Inc.

N00000008325

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

(Attach additional pages if necessary)

(continued)

The date of adoption of the amendment(s) was: August 18, 2004

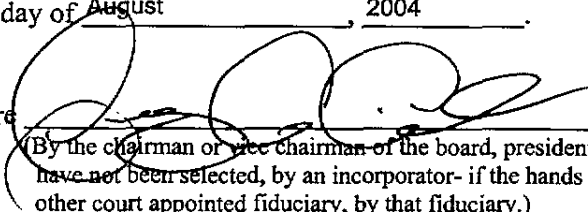
Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 18 day of August, 2004.

Signature


(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

SERGIO A. AMBROS

(Typed or printed name of person signing)

PRES

(Title of person signing)

FILING FEE: \$35