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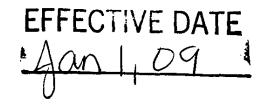
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SUMMER	FIELD BASKETBALL, INC.	-
DOCUMENT NUMBER: N0100000900	5	
The enclosed Articles of Amendment and fe	ee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
KEVIN DONALDSON	me of Contact Person)	_
(IVAI	me of Contact Person)	
IN TOUCH SPORTS, INC.		_
	(Firm/ Company)	
10801 N SASSAFRAS ST		
	(Address)	
TAMPA, FL 33617	(Code and Tim Code)	_
For further information concerning this matt	y/ State and Zip Code) ter, please call:	
KEVIN DONALDSON (Name of Contact Person)	at (813) 410-2341 (Area Code & Daytime Telephone	Number
Enclosed is a check for the following amour	,	·
_		
▼ \$35 Filing Fee	Certified Copy Cer (Additional copy is Cer enclosed) (Ad	.50 Filing Fee tificate of Status tified Copy Iditional Copy enclosed)
Mailing Address Amendment Section	Street Address Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of



SUMMERFIELD BAS (Name of Corporation as currently filed wi		<u> </u>
NO100000		_
(Document Number of Corpo	 +	
Pursuant to the provisions of section 617.1006, Florida Statuthe following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation		fit Corporation adopts
The new name must be distinguishable and contain the wo abbreviation "Corp." or "Inc." "Company" or "Co." may		oorated" or the
B. Enter new principal office address, if applicable:	10801 N SASSAFRA	AS STREET_
(Principal office address <u>MUST BE A STREET ADDRESS</u>	TAMPA FL 33617	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10801 N SASSAFRA TAMPA FL 33617	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office Name of New Registered Agent: KEVIN DO	ice address in Florida, enter address:	the name of the
Name of New Registered Agent: KEVIN DO	Name of New Registered Agent: KEVIN DONALDSON	
	RTH SASSAFRAS ST Iorida street address)	PH 1:
<u>TAMPA</u>	(City)	Florida 33614 RATIONS (Zip Code)
position.	A Agent: Im familiar with and accept A lew Registered Agent, if change	

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)

Title **Name** Address Type of Action PD JOHN ADEJUNMOBI PO BOX 535 🗖 🗖 Add Remove **ELSINORA ADEJUNMOBI** D PO BOX 535 Remove RIVERVIEW FL 33568 TD **BRIAN TURNER** PO BOX 535 Remove RIVERVIEW FL 33568 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

ATTACHMENT: AMENDING OFFICERS/DIRECTORS:

TITLE	NAME	ADDRESS	YPE OF ACTION
SECRETARY	WAYNE SHOFFNER	10737 MOSS ISLAND DRIVE, RIVERVIEW FL 33569	REMOVE
PRESIDENT	KEVIN DONALDSON	10801 NORTH SASSAFRAS STREET, TAMPA FL 33617	ADD
VICE PRESIDENT	DENNIS DONALDSON	4729 NORTH DAWNMEADOW COURT, PLANT CITY FL 33	3566 ADD
TREASURY	REGINA CARY	8717 HYALEAH ROAD, TAMPA FL 33617	ADD
SECRETARY	YOLANDA BEST	4819 LINEBAUGH AVENUE, TAMPA FL 33617	ADD

The date of each amendmen	t(s) adoption: DECEMBER 26, 2008
Effective date if applicable:	JANUARY 1, 2009
	(no more than 90 days after amendment file date)
. Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_DE	DEMBER 26, 2008
Signature _	Wath
hav	the chairman or vice chairman of the board, president or other officer-if directors re not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	KEVIN DONALDSON
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)