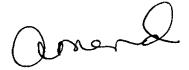
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JUN 17 2013 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ALL AMERICAN PR	OSPECTS BASEBALL, INC.
N07000003228 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submi	tted for filing.
Please return all correspondence concerning this matter	to the following:
BRUCE ARRICK	
(1	Name of Contact Person)
ALL AMERICAN PROPSECTS BASEBALL, INC.	
	(Firm/ Company)
9100 SOUTH DADELAND BLVD., SUITE 903	
	(Address)
MIAMI, FLORIDA 33156	
(0	City/ State and Zip Code)
BARRICK@ARRICKLAW.COM	
E-mail address: (to be used for	or future annual report notification)
For further information concerning this matter, please ca	all:
BRUCE ARRICK	(305)670-888 ⊘ at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pays	able to the Florida Department of State:
\$35 Filing Fee	2\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$\sigma \$\sigma \text{\$\sigma \text{\$\sig
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation \mathbf{of}

ALL AMERICAN PROSPECTS BASEBALL, INC.		FILED
(Name of Corporation as o	currently filed with the Florida Dep	t, of State
N07000003228		JUN - 8 PM 3:
(Document	Number of Corporation (if known)	STATE OF STA
rursuant to the provisions of section 617.1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit	Corporation adopts the following
. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:		abbreviation "Corp." or "Inc."
Principal office address <u>MUST BE A STREET ADDI</u>	RESS)	
	_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
If amending the registered agent and/or registere new registered agent and/or the new registered o		ne name of the
Name of New Registered Agent:	THE AUTESS.	
	(Florida stree	et address)
		F1:J.
_	(City)	, Florida (Zip Code)
lew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		gations of the position.
	Signature of New Registered Age	ent, 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: X Change X Remove X Add	<u>V Mik</u>	n <u>Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>D</u>	MICHAEL C. BRANTLEY, SR.	412 SW CHERRYHILL RD.
X Add			PORT ST. LUCIE, FL 34953
Remove			
2) Change			
Add			
Remove			
3) Change		***************************************	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
6) Change			
Add			
Remove			

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

	date of each amendment(s) adoption: this document was signed.	MAT 1, 2013	_, if other than the
Effe	ective date <u>if applicable</u> :		
	(n	no more than 90 days after amendment file date)	
	e: If the date inserted in this block does ument's effective date on the Department	not meet the applicable statutory filing requirements, this date will not of State's records.	be listed as the
Ado	option of Amendment(s)	CHECK ONE)	
	The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	
	There are no members or members entit adopted by the board of directors.	tled to vote on the amendment(s). The amendment(s) was/were	
	Dated (1.	15	
	Signature		_
	• • •	rice chairman of the board, president or other officer-if directors	
		ed, by an incorporator - if in the hands of a receiver, trustee, or d fiduciary by that fiduciary)	
	BRUCE A. ARR	JCK	
		(Typed or printed name of person signing)	
	DIRECTOR		
		(Title of person signing)	