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Amend and 10.21.13

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

AME OF CORPORATION: LAKE COUNTY SOCCER CLUB, INC.				
DOCUMENT NUMBER: N0800000249				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
NAJI S. KHOURI				
(Name of Contact Person)	_			
LAKE COUNTY SOCCER CLUB, INC.				
(Firm/ Company)				
27343 STATE ROAD 19				
(Address)	_			
TAVARES, FL 32778				
(City/ State and Zip Code)	_			
TREASURER@LAKECOUNTYSC.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
NAJI S. KHOURI407415-9747				
(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  \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & Certificate of Status				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building				

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	ly filed with the Florida Dept. of Stat	<u>e</u> )
N08000000249		
. (Documen	nt Number of Corporation (if known)	
Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporate		For Profit Corporation adopts the following
A. If amending name, enter the new na	me of the corporation:	
	· · · · · · · · · · · · · · · · · · ·	The new
name must be distinguishable and contair <u>"Company" or "Co." may not be used in</u>		ated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address,		
Principal office address MUST BE A ST		
	-	
C. Enter new mailing address, if appli	cable:	
(Mailing address <u>MAY BE A POST (</u>	OFFICE BOX)	
		19
		ida, enter the name of the
<ol> <li>If amending the registered agent an new registered agent and/or the new</li> </ol>		da, enter the name of the
Name of New Registered Agent:	NAJI S. KHOURI	<del></del>
	27343 STATE ROAD	19
New Registered Office Address:	(Florida street address	)
	TAVARES	, Florida 32778
	(City)	(Zip Code)
New Registered Agent's Signature, if cl	hanging Registered Agent:	
hereby accept the appointment as registe		ept the obligations of the position.
	Way 2 Khen	
<u>Sig</u>	nature of New Registered Agent, if char	nging

Page 1 of 4

## 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	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	MIKE STONE	27343 STATE ROAD 19
Add X Remove	<del></del>		TAVARES, FL 32778
2) Change	TD	PERRY BLESSING	27343 STATE ROAD 19
Add			TAVARES, FL 32778
X Remove	PD	SCOTT RUSIN	27343 STATE ROAD 19
3) Change	<del></del>		TAVARES, FL 32778
Add			
4) Change	VTD	NAJI S. KHOURI	27343 STATE ROAD 19
$\frac{X}{X}$ Add	***************************************		TAVARES, FL 32778
Remove			
5) Change	SD	RACHEL R. GRANT	27343 STATE ROAD 19
X Add	<del></del>		TAVARES, FL 32778
Remove			
6) Change	D	DARYL J. VERKAIK	27343 STATE ROAD 19
X Add			TAVARES, FL 32778
Remove		Page 2 of 4	

E. If amending or adding additional Articles, enter change(s) here:						
(attach additional sheets, if necessary). (Be specific)						
Add MATTHEW SMITH as Director						
Add VENILDE RODRIGUES as Director						
Addresses for the 2 directors above in section E is also:						
27343 STATE ROAD 19 TAVARES, FL 32778						

The	date of each amendment(s) adoption: JUNE 12, 2013	
Effe	ective date if applicable: JUNE 12, 2013	
	(no more than 90 days after amendment file date)	•
Ado	option 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 JUNE 13, 2013	
	Signature // Og // Meeci	
	(By the chairman of 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)	
	NAJI S. KHOURI	
	(Typed or printed name of person signing)	
	VICE PRESIDENT/TREASURER	
	(Title of person signing)	