## N10000001 528

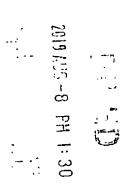
(Re	equestor's Name)	
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## **COVER LETTER**

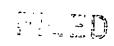
TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION	Cape Coral Homets In	ne			
DOCUMENT NUMBER:		<del></del>	<del></del> -	· ·	_
The enclosed Articles of Am	endment and fee are subm	nitted for filing.			
Please return all corresponde	ence concerning this matter	to the following:			
Cascy M. Allo					
	(	Name of Contact Per	rson)		
Cape Coral Hornets					
		(Firm/ Company)	)		_
1822 SW 16th Ter					
		(Address)	<u>.                                    </u>		_
Cape Coral, Florida, 33991					
10.1	(	City/ State and Zip C	Code)		_
caseyallo@yahoo.com					
E	-mail address: (to be used	for future annual repo	ort notification	)	
For further information conc	erning this matter, please c	call:			
Casey M. Allo			914	406-0606	
	(Name of Contact Person)			(Daytime Telephone Number)	_
Enclosed is a check for the f	ollowing amount made pay	able to the Florida D	epartment of S	State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing A	ddress	Stre	eet Address		

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



2019 AUS -8 PM 1:29

Cape Coral Hornets Inc.		
(Name of Corporation as curre	ntly filed with the Flo	rida Dept. of State)
N19000001528		·
(Document Num	ber of Corporation (if I	known)
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:		or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
Gulf Coast Bombers Inc		The new
name must he distinguishable and contain the word "corpore" "Company" or "Co." may not be used in the name.	ition" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	n/a	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	)	
C. Enter new mailing address, if applicable:	n/a	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		, enter the name of the
n/a	addi ess.	
Name of New Registered Agent:		
New Registered Office Address:	(1	Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fo	l Agent: amiliar with and accep	t the obligations of the position.
	Signature of New Regi	stered 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: XChange X Remove X Add	<u>V</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			·
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
6) Change			
Add			
Remove			

n/a	E. If amending or adding additional Artication (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	π/a	
	·····	
		11

The date of each amendment(s) ac	n/a Iontion:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will no partment of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac was/were sufficient for approve	dopted by the members and the number of votes east for the amendment(s) al.	
There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
08/05/219 Dated		
Signature		
have not be	rman of the ce chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)  President	
	(Title of person signing)	
	(Title of person signing)	