P19000024321

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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (During Fakik Nama) |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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JAMES D SANDISON SANDISON CONSULTING

7013 BOLZANO WAY ELK GROVE CALIFORNIA 95757 jsandison@aol.com (916) 224-5029

March 28, 2019

Florida Department of State Amendment Section Division of Corporations PO Box 6327 Tallahassee FL 32314

RE: Champ Sports, Inc.

Document Number P19000024321

To Whom it May Concern:

I have been hired by Greta Maya Pordomingo, President of Champ Sports, Inc, to assist her correcting the spelling of her name on the Articles of Incorporation. She is traveling right now and has authorized me to sign for her.

Enclosed is the Articles of Amendment to Articles of Incorporation requesting the President's name to be changed from Greta May to Greta Maya Pordomingo.

As always, if you have any questions, please do not hesitate to contact me.

Thank you.

Sincerely,_

Jim Sandison

Consultant

cc: Greta Maya Pordomingo

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF COR | PORATION: Champ Sports | | | | | | |
|--|---|---|--|--|--|--|--|
| | UMBER: | | | | | | |
| | icles of Amendment and fee are su | bmitted for filing. | | | | | |
| Please return all c | orrespondence concerning this ma | tter to the following: | | | | | |
| | Jim Sandison | | | | | | |
| | Name of Contact Person | | | | | | |
| | Sandison Consulting | | | | | | |
| | | Firm/ Company | | | | | |
| | 7013 Bolzano Way | | | | | | |
| | Address | | | | | | |
| | Elk Grove CA 95757 | | | | | | |
| | City/ State and Zip Code | | | | | | |
| is | sandison@aol.com | | | | | | |
| -, | - | sed for future annual report | notification) | | | | |
| | 2 mm mm m (10 00 m | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| For further inform | nation concerning this matter, pleas | se call: | | | | | |
| Jim Sandison | | 916 at (| de & Daytime Telephone Number | | | | |
| Na | ime of Contact Person | Area Co | de & Daytime Telephone Number | | | | |
| Enclosed is a chec | ck for the following amount made | payable to the Florida Depa | artment of State: | | | | |
| S35 Filing Fee | e □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$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 Clifton Building 2661 Executive Center Circle | | | | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

| N/A | | |
|--|--|--|
| (Name of Corporation as curren | tly filed with the Florida | Dept. of State) |
| P19000024321 | | |
| (Document Number | of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation: | s Florida Profit Corporat | ion adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | | |
| N/A | | The new |
| name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional ce | |
| B. Enter new principal office address, if applicable: | N/A | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | 2 3 1 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | 1 PM 6: |
| | | \$ FO |
| D. If amending the registered agent and/or registered office ad- | | e name of the |
| new registered agent and/or the new registered office addre Name of New Registered Agent N/A | <u>ss:</u> | |
| | | |
| (Florida s | treet address) | |
| New_Registered Office Address: | | , Florida |
| sen negative office mares. | (City) | (Zip Code) |
| | | |
| | | |
| New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familian | <mark>it:</mark> Society and a society the obliga | artinum af the manitim |
| т петену ассерстве арронитет их гедімегей адет, - і ат затина | - жин ана ассері іне отцу | анон <i>ь ој те роѕшоп.</i> |
| | | |
| | | |

Signature of New Registered 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.

| X Change | PT | John Do | <u>oc</u> | |
|---------------------------------|-------------|------------|--------------------------------------|-----------------|
| $\underline{\mathbf{X}}$ Remove | <u>v</u> | Mike Jones | | |
| X Add | <u>sv</u> | Sally St | nith | |
| Type of Action (Check One) | Title | | <u>Name</u> | <u>Addres</u> s |
| 1) X Change | P | _ | Currently P name is misspelled/incon | N/A |
| Add | | | | |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | **** |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | | | | |
| Add | | | | |
| Damaria | | | | |

| E. <u>If amending or add</u> (Attach additional sh | ing additional Articets, if necessary). | icles, enter chans (Be specific) | <u>te(s) here</u> : | | | |
|---|---|-------------------------------------|---------------------|--------------------|---------------|-------------|
| N/A | | | | | | |
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| F. If an amendment p | rovides for an excl | nange, reclassific | ation, or cancells | ation of issued sh | iares. | |
| provisions for imp | lementing the ame | ndment if not co | ntained in the ar | nendment itself: | | |
| | ole, indicate N/A) | | | | | |
| Ν/Λ | | | | | | |
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| N/A | |
|--|---------------------------|
| The date of each amendment(s) adoption: | , if other thar |
| N/A | |
| Effective date if applicable: | |
| (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dedocument's effective date on the Department of State's records. | ate will not be listed as |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval. | s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s): | ent |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by" (voting group) | |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required. | er |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| 3/28/2019 Dated | |
| Signature For GRETA MAYA POR DOWNING TRE | Sadar - |
| (By a director, president or other officer if directors or officers have not been selected, by an incorporator if in the hands of a receiver, trustee, or other cou appointed fiduciary by that fiduciary) | |
| Jim Sandison for Greta Maya Pordomingo | |
| (Typed or printed name of person signing) | |
| Consultant for the President | |
| (Title of person signing) | |

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