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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	eball Club Inc			_
DOCUMENT NUMBER: N22000011852				
The enclosed Articles of Amendment and fee are sub	mitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
John Dibert				
	(Name of Contact Perso	on)		
	(Firm/ Company)	<u></u>		_
3011 Misty Meadow Ct				
	(Address)			_
Spring Hill, FL 34606				
	(City/ State and Zip Coo	de)	,	- ;
johnd122062@yahoo.com				)) (**) (**)
E-mail address: (to be use	for future annual report	notificatio	n)	;
For further information concerning this matter, please	call:			
John Dibert	41 at	9	346-2612	ζ.
(Name of Contact Person		rea Code)	(Daytime Telephone Number)	_ ;
Enclosed is a check for the following amount made p	ayable to the Florida Dep	artment of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is esed)	
Mailing Address  Amendment Section		Address		
Division of Corporations		dment Section of Corpo		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

Timber Pines Pickleball Club Inc

(Name of Corporation as currently filed with the	Florida Dept. of State)	,		
N22000011852	_			
(Docum	ent Number of Corporation (if	known)		
Pursuant to the provisions of section 617,1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not I</i>	For Profit Corporation adopts the following		
A. If amending name, enter the new name of the	corporation:			
N/A		The new		
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name		ted" or the abbreviation "Corp." or "Inc."		
B. Enter new principal office address, if applica	3011 Misty Meado	3011 Misty Meadow Ct		
(Principal office address MUST BE A STREET AL	DDRESS ) Spring Hill FL 346	06		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	3011 Misty Meado Spring Hill Fl 3460	3011 Misty Meadow Ct Spring Hill Fl 34606		
D. If amending the registered agent and/or regis				
new registered agent and/or the new register	ed office address:			
Name of New Registered Agent:	John Dibert			
	3011 Misty Meadow Ct			
New Registered Office Address:		(Florida street address)		
The state of the s	Spring Hill	Florida 34606		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: 1. I am familiar with and acce	pt the obligations of the position.		
_	9. Signature of Navy Page	istered 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:  X Change X Remove X Add	PT John   Y Mike SY Sally	<u> Jones</u>	
Type of Action (Check One)	Title	Name	Address
1) Change Add	T, PTD	Karen Powers	6553 Pine Meadows Dr Spring Hill FI 34606
x Remove			
2) Change × Add	T. PTD	John Dibert	3011Misty Meadow Ct Spring Hill Fl 34606
Remove  Change  Add  Remove	PTD	Mike Rocheleau	3076 Appleblossom Trail Spring Hill Fl 34606
4) Change Add	PTD	Diane Beaudoin	2367 Morning Glory Trail Spring Hill Fl 34606
Remove			· .
5) Change Add			
Remove			
6) Change Add	<del></del>		
Remove			
E. If amending or add (attach additional sh		rticles, enter change(s) here: (Be specific)	
N/A		- <del></del>	
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The date of each amendment(s) ado date this document was signed.	ption:			, if other than the
Effective date if applicable:	<u>-</u> .	s after amendment file date,		
	(no more than 90 days	s after amendment file date;	)	
<u>Note:</u> If the date inserted in this block document's effective date on the Department.	c does not meet the applica artment of State's records.	ble statutory filing requirer	nents, this date will not b	e listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and t	he number of votes cast for	the amendment(s)	

adopted by the b	oard of directors.
Dated	November 30,2022
Signatur	(By the chairman or 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)
	Marie Knowlton
	(Typed or printed name of person signing)
	President, Director

(Title of person signing)

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were