707370

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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: NOTH	er It Island Li	He League
DOCUMENT NUMBER: 707370		
The enclosed Articles of Amendment and fee are submi	tted for filing.	
Please return all correspondence concerning this matter	to the following:	
JACK Ly((Name of Co	ontact Person)	_
Merntt Island	Little League	;
1055 Mercede	S Drive	
Merrit Island (City/State 8	FL, 3295	<u> </u>
JLuchs & CF1.1 E-mail address: (to be used for	or future annual report notification	on)
For further information concerning this matter, please ca	all:	
JACK Lychs (Name of Contact Person)	at (32) 517-8 (Area Code & Daytime	457 Telephone Number)
Enclosed is a check for the following amount made paya	able to the Florida Department of	State:
\$35 Filing Fee \$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 Ci	

Tallahassee, FL 32301

	Articles of Amendme	nt	FILED		
	Articles of Incorporati	ion // /	MAR		
Name of Corporation as	sland by currently filed with the	IK Leage	MAR -7 PM 12: 07 MASS TENCH		
	70 t Number of Corporation ((if known)			
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:					
A. If amending name, enter the new na The new name must be distinguishable abbreviation "Corp." or "Inc." "Compa	and contain the word "co		NC. porated" or the		
B. Enter new principal office address, i (Principal office address MUST BE A ST		Denttse	nd, 152		
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C		155 Mero Nerritt 15 -L. 329	edes Drive sland E2		
D. If amending the registered agent and new registered agent and/or the new			the name of the		
Name of New Registered Agent:	<u>JACK L</u> 1055 M	-uchs ercedes D	<u>~</u>		
<u>New Registered Office Address</u> :	Merritt !	street address) Sland City)	Florida 32952 (Zip Code)		
New Registered Agent's Signature, if ch I hereby accept the appointment as regi- position.	stered agent. I am fami	t: iliar with and accept MC gistered Agent, if chang	the obligations of the		

Page 1 of 3

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) **Type of Action** Title Address Name ☐ Add ☐ Remove ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption:
(date of adoption is required)
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption 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.
Signature (By the chairmen 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) Cheryl Avdellas
(Typed or printed name of person signing)
Treasure
(Title of person signing)