7/6/8/

(F	equestor's Name)	
A)	ddress)	
(A	address)	
(C	City/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nam	ne)
([Occument Number)	
Certified Copies Certificates of Status		of Status
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LLAHASSEE, FLORIDA

2010 SEP -7 PM 1: 32

COVER LETTER

TO: Amendment Section Division of Corporations

		•	•
NAME OF CORPORA	TION: South	Brandon Little	League, Inc.
DOCUMENT NUMBE	r: 716 68	4	
The enclosed Articles of	Amendment and fee are subm	itted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Michael (Name of C	Palmiotto ontact Person)	
Sou	th Brandon (Firm/	Little League	Jnc.
	P.O. BOX 1	J Z Idress)	Manufacture and the same and th
	Grandon, Fl	33509 and Zip Code)	
		erizon. Net for future annual report notification	
For further information of	concerning this matter, please of	eall:	
Michael .	Palmiotic	at (8/3) 2/5- (Area Code & Daytime	3037
			-
Enclosed is a check for the	he following amount made pay	vable to the Florida Department of	f State:
	□ \$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)
Division P.O. Box	ent Section of Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

Articles of Amendment Articles of Incorporation

ROIDSEP 7 PM 1:32

(Name of Corporation as currently filed with the

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

he new name must be distinguishable an bbreviation "Corp." or "Inc." <u>"Compan</u>		
Enter new principal office address, if rincipal office address <u>MUST BE A STI</u>		······································
Enter new mailing address, if application (Mailing address MAY BE A POST OF		
new registered agent and/or the new		, enter the name of th
. If amending the registered agent and/new registered agent and/or the new in Name of New Registered Agent: New Registered Office Address:		
Name of New Registered Agent:	registered office address:	, enter the name 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)

<u>Title</u>	Name	Address	Type of Action
DT	SAYlor, Chris Palmiotto, Michael	2711 Bent Leaf Dr Valvico, FL 33594	□ Add ⊠ Remove
DT	Palmiotto, Michael	P.O. BOX 122 Brandon, FL 33509	Add Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter cl tional sheets, if necessary). (Be specific		
	· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) adoption: $\frac{9/3/10}{}$
Effective date if applicable: 9/3/10 (date of adoption is required)
(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.
Dated
(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)
Kenneth Mull' (Typed or printed name of person signing)
(Title of person signing)

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