## 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





03/04/25--01012--026 \*\*35.00



## COVER LETTER

TO: Amendment Section Division of Corporations

NORTHEAST RA NAME OF CORPORATION:	IDERS YOUTH AS	SOCIAT	ION, IN	·C.	_
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this ma	tter to the following:	:			
Tony Paris					
<del>-</del>	(Name of Contact	Person)		<del>-</del>	_
Northeast Raiders Youth Association, Inc.					
	(Firm/ Compa	any)			_
P.O. Box 21432					
	(Address)	l			_
St. Petersburg, Ft. 33742					
	(City/ State and Z	ip Code)			
E-mail address: (to be use	ed for future annual	report not	iificatio	n)	
For further information concerning this matter, pleas	se call:				
B. Cowan		727 at		460-0511	
(Name of Contact Perso			Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made	payable to the Florid	la Departi	ment of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status			Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address					

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, Fl. 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

as of June 28, 2024

Dated

Signature

(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)

Tony Paris

(Typed or printed name of person signing)

(Title of person signing)

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

## Articles of Amendment to Articles of Incorporation of

NORTHEAST RAIDERS YOUTH ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florid	da Dept. of State)	<del></del>	
718652			
(Document Nu	imber of Corporation (if	known)	
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not F	for Profit Corporation adopts the	following
A. If amending name, enter the new name of the corpo	oration:		
	·		_The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporate	ed" or the abbreviation "Corp." of 	r "Inc." 25
B. Enter new principal office address, if applicable:			₹ 2
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>(SS</u> )	•	ئے <mark>ہے</mark>
		;· ;.·	- <del>*</del>
		ه و این از این	- PM - 5
C. Enter new mailing address, if applicable:		<u> </u>	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			
D. If amending the registered agent and/or registered	office address in Florid	a, enter the name of the	
new registered agent and/or the new registered offi			
Name of New Registered Agent:			
	(	Florida street address)	
<u>New Registered Office Address:</u>			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registe			
I hereby accept the appointment as registered agent. I am	n familiar with and accep	it the obligations of the position.	
	Signature of New Regi.	stered Agent, if changing	

<u></u> <u>-</u>	<del></del>	<u> </u>				<del></del>
	<del></del>					
<del>_</del>				<u>.</u>		
-		<u> </u>				
	4				<del>-</del>	
			<u> </u>			<del></del>
•				<del></del>		
		<del>.</del>				
			<del></del>	<u></u>		
·						
The date of each amendment date this document was signed	t(s) adoption:	ne 28, 2024			<del></del>	_, if other than the
Effective date if applicable:	June 28, 2024					
<del></del>	(no m	ore than 90 days	after amendmer	u jile date)		
<b>Note:</b> If the date inserted in the document's effective date on t			de statutory filir	ng requirements,	this date will not	be listed as the
Adoption of Amendment(s)	( <u>CH</u>	ECK ONE)				
The amendment(s) was/was/were sufficient for ap		e members and th	e number of vo	les cast for the a	mendment(s)	

. .

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 De           V         Mike Jo           SV         Sally Sr	<u>nes</u>			
Type of Action (Check One)	Title	<u>Name</u>	Address		
1) AAAA Change Add Remove	DCEO	TONY PARIS	P.O. BOX 21432 ST. PETERSBURG, FL 33742		
2) xxxx Change Add	DT	DAVID HUNT	P.O. BOX 21432 ST. PETERSBURG, FL 33742		
Remove 3) Add Remove	<u>DV</u> .	ETHAN GODDARD	P.O. BOX 21432 ST. PETERSBURG, FL 33742		
4) Change Add	DS	SAM CIBRONE	P.O. BOX 21432 ST. PETERSBURG, FL 33742		
Remove  5) Change Add	D	RAY CHASSEREAU	P.O. BOX 21432 ST. PETERSBURG, FL 33742		
Remove 6) Change Add Remove					
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)  The minimum number of Directors is 3 and the maximum number of Directors is 5.					
	- Interiors is 5 and				