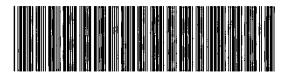
732471

(Re	questor's Name)	<u></u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
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(RM 11-17-14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	BOYNTON	BEACH LIT	TLE LEAGUE,	INC		
DOCUMENT NUMBER:	732471					
The enclosed Articles of Am	endment and fee are subm	itted for filing.				
Please return all corresponde	nce concerning this matter	to the following:				
Ron Passino						
1 (01) 1 (00) 10		(Name of Contact Person	n)			
		(Firm/ Company)				
300 W. Wool	bright Road					
	<u> </u>	(Address)				
Boynton Bea	ch, FL 3343	5				
		(City/ State and Zip Code	e)			
rpass2	2@gmail.co	m		Ξ_{c}	h	
E-mail address: (to be used for future annual report notification)			.	ACM 51	1 1	
For further information concerning this matter, please call:				/ I	a waste	
Michele Cam	nps	_{at (} 561	, 248-5308	·	<u>-</u> -	T
(Name of Co	ntact Person)	(Area Co	ode & Daytime Telephone Nu	mber) .	PM 5: 10	ساده و محدده آ
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida Depa	artment of State:	<u>Ş</u> H	<u>~</u>	
□ \$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)	٠		
Mailing A Amendme	ddress nt Section		Address Iment Section			

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	BOYNTON	I BEACH LIT	TLE LEAGUE,	INC		
DOCUMENT NUMBER:	732471					
The enclosed Articles of Am	endment and fee are subn	nitted for filing.				
Please return all corresponde	ence concerning this matte	r to the following:				
Ron Passino						
		(Name of Contact Person	1)			
		(Firm/ Company)				
300 W. Wool	bright Road					
		(Address)				
Boynton Bea	ch, FL 3343	35				
		(City/ State and Zip Cod	e)			
rpass2	2@gmail.co	m		Ħ.c	k	
E	-mail address: (to be used	for future annual report	notification)		3	un 787
For further information conc	erning this matter, please	call:		73 75	1	THE STATE OF THE S
Michele Cam	nps	at (, 248-5308	<i>2</i> %	<u></u>	ا المالية
(Name of Contact Person) (Area Code & Daytime Telephone Number)						genting Assume
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida Depr	artment of State:	- 5 - 5 - 1	PH 5: 10	
□ \$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)			
3 5 - 111 A	44	S4	A al al			

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 of

BOYNTON BEACH LITTLE LEAGUE, INC

(Name of Corporation as currently filed	with the Florida Dept. of State)	_		
732471				
(Document	Number of Corporation (if known)		-	
Pursuant to the provisions of section 617.1006, I amendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Florida Not For Profit Corporation</i> ac	lopts the	followi	ng
A. If amending name, enter the new name of	the corporation:			
,			_The ne	w.
name must be distinguishable and contain the w "Company" or "Co." may not be used in the n	ord "corporation" or "incorporated" or the abbreviation 'ame.	'Corp."	or "Inc.	**
3. Enter new principal office address, if appl			_	
Principal office address <u>MUST BE A STREE</u>	<u>TADDRESS</u>)		_	
			_	
			-	
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFIC	<u> </u>		-	
				1,419
		,	- <u></u>	1
	egistered office address in Florida, enter the name of the		J	
new registered agent and/or the new regis	stered of fice address:		: 5	, ,
Name of New Registered Agent:			TD 125	es es
			نن ا	- 1110
New Registered Office Address:	(Florida street address)	ģM.	O	
	, Florida			
	(City)	Zip Code	?)	
New Registered Agent's Signature, if changir I hereby accept the appointment as registered a	ng Registered Agent: gent. I am familiar with and accept the obligations of the p	osition.		
Sic	nature of New Registered Agent if changing			

Page 1 of 4

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 <math>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: XChange X Remove X Add	PT John D V Mike Je SV Sally S	ones		14 100 -5
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	1 2 2 UT
1) Change	<u>T</u>	WAHLFRID, KARL	300 W. WOOLB	المساد والإراب
Add X Remove			BOYNTON BEA	CH, FĹ 33435
2) Change	<u>T</u>	Camps, Michele	300 W. WOOLB	RIGHT ROAD
X Add			BOYNTON BEA	CH, FL 33435
3) Change	V	Boyle, Sean	300 W. WOOLB	RIGHT ROAD
X			BOYNTON BEA	CH, FL 33435
Remove				
4) Change	<u>VP</u>	Rubin, Toby	300 W. WOOLE	RIGHT ROAD
Add			BOYNTON BEA	ACH, FL 33435
X Remove				
5) Change				·
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Ar attach additional sheets, if necessary).	(Be specific)					
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The	The date of each amendment(s) adoption: 7/11/2014 late this document was signed.	, if other than the
Eff	Effective date <u>if applicable</u> : (no more than 90 days after amendment file d	······································
Add	Adoption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast was/were sufficient for approval.	the amendment(s)
	There are no members or members entitled to vote on the amendment(s). The amendadopted by the board of directors.	nent(s) was/were
	Dated 10/08/2914	
	(By the chairman or vice chairman of the board, president or other have not been selected, by an incorporator – if in the hands of a other court appointed fiduciary by that fiduciary)	
	Ron Passino	
	(Typed or printed name of person signing)	
	President	Late Comment
	(Title of person signing)	