747936

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	FLORIDA YOUTH S N:	OCCER ASSOCIA	TION, INC	
	47936			
DOCUMENT NUMBER: _		_ 		
The enclosed Articles of Ame	endment and fee are subm	itted for filing.		
Please return all corresponder	nce concerning this matter	to the following:		
MICHELLE COOK				
	((Name of Contact Pe	erson)	
FLORIDA YOUTH SOCCE	R ASSOCIATION			
		(Firm/ Company	·)	
2828 LAKE MYRTLE PAR	K ROAD			
		(Address)		
AUBURNDALE FL 33823				
	(City/ State and Zip	Code)	
FINANCE@FYSA.COM				
E-	mail address: (to be used	for future annual rep	ort notification	
For further information conce	erning this matter, please o	eall:		
DALE BURKE		at	863	268-8220
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida I	Department of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & [Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	D Filing Fee cate of Status ded Copy cional Copy is seed)
Mailing Address		Str	reet Address	

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

Articles of Amendment to Articles of Incorporation of



FLORIDA YOUTH SOCCER ASSOCIATION, INC

		
(Name of Corporation as o	currently filed with the Florida Dep	it. of State) Zeid HAY 24 P 12: 87
747936		
(Document	Number of Corporation (if known)	IAZ LARACIGLE FLOR LA
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit	Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the	e abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)	
		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
D. If amending the registered agent and/or registere	ed office address in Florida, enter t	he name of the
new registered agent and/or the new registered of		.
Name of New Registered Agent:		
_	(Florida stre	et addressi
New Registered Office Address:	,	· · · · · · · · · · · · · · · · · · ·
		Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi- I hereby accept the appointment as registered agent. I		gations of the position.
	Signature of New Registered Ag	ent, 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	<u>V</u> <u>Mi</u>	nn Doe ke Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	s	ANN FULLER	4873 VERONA CIRCLE
, Add			MELBOURNE FL 32940
X Remove			
2) Change	<u>s</u>	CHRISTOPHER ELLISTON	17498 SW 143 PLACE
X Add			MIAMI FL 33177
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artituch additional sheets, if necessary).	(Be specific)
<u></u>	
<u></u>	
	

l'he	e date of each amendment(s) adoption:	if other than th
	e this document was signed.	
Effe	fective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not cument's effective date on the Department of State's records.	be listed as the
Ado	option 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 5/21/19	
	Signature U	
	(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)	
	ERIC HEIDEL	
	(Typed or printed name of person signing)	
	TREASURER	
	(Title of person signing)	