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Amend

JUN 2 6 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	QUARTERBACK (CLUB OF BROOK!	SVILLE, INC.	
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fed	e are submitted for fi	ting.		
Please return all correspondence concerning	this matter to the foll	owing:		
Monte Patterson				
	(Name of C	Contact Person)		
LEOPARD QUARTERBACK CLUB OF B	ROOKSVILLE, INC	· · ·		
	(Firm/	Company)		
P.O. Box 401				
	(A	ddress)		
Brooksville, FL 34605				
	(City/ State	and Zip Code)	-	
leopardquarterbackclub@gmail.com				
E-mail address: (t	o be used for future a	nnual report notific	ation)	
For further information concerning this matte	r. please call:			
Monte Patterson		352 at	279-5985	
(Name of Contact	ct Person)		de) (Daytime Telephone	Number)
Enclosed is a check for the following amount	. made payable to the	Florida Departmen	t of State:	
■ \$35 Filing Fee □\$43.75 Filin Certificate o		Copy C nal copy is C	52.50 Filing Fee ertificate of Status ertified Copy Additional Copy is inclosed)	
Mailing Address Amendment Section		Street Addre		
Amendment Section Division of Corporations		Amendment Section Division of Corporations		

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

June 15, 2019

MONTE PATTERSON P.O. BOX 401 BROOKSVILLE, FL 34605

SUBJECT: LEOPARD QUARTERBACK CLUB OF BROOKSVILLE, INC.

Ref. Number: 757583

We have received your document for LEOPARD QUARTERBACK CLUB OF BROOKSVILLE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 919A00011989

Irene Albritton Regulatory Specialist II

www.sunbiz.org



May 31, 2019

MONTE PATTERSON P.O. BOX 401 BROOKSVILLE, FL 34605

SUBJECT: LEOPARD QUARTERBACK CLUB OF BROOKSVILLE, INC.

Ref. Number: 757583

We have received your document for LEOPARD QUARTERBACK CLUB OF BROOKSVILLE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 719A00010930

Articles of Amendment to Articles of Incorporation

Actic	les of Amendment	Ö, .
	to es of Incorporation	
Atticle	of	. J.
LEOPARD QUARTERBACK CLUB OF BROOKSVILLE.	. INC.	
(Name of Corporation as currer	ntly filed with the Flo	rida Dept. of State)
757583		
(Document Numb	ber of Corporation (if k	known)
Pursuant to the provisions of section 617.1006, Florida Statut mendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	tion:	
N/A		The new
name must be distinguishable and contain the word "corpora	ution" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
'Company" or "Co," may not be used in the name.	207 E. FORT DADI	FAVE SHITE 401
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS		
Trincipal Office address MOST BE ASTREET ADDRESS	BROOKSVILLE, F	L 34601
C. P.A. annual of the state of the state of		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 401	
	BROOKSVILLE, F	L 34605
	,	
). If amending the registered agent and/or registered off		, enter the name of the
new registered agent and/or the new registered office a	address:	
Name of New Registered Agent;		
450 PLE	EASANT GROVE RD	
New Registered Office Address:	d l	Florida street address)
INVERN	NESS	, Florida <u>34452</u>
	(City)	Zip Code)
	·	•
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa		of the obligations of the position.
. , , , , , , , , , , , , , , , , , , ,		, , , ,
	Signature of New Regi	stered Agent, 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: \underline{X} Change \underline{X} Remove \underline{X} Add	PT John D V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	MONTE PATTERSON	PO BOX 401
Add			BROOKSVILLE, FL 34605
Remove			
2) Change	Т	ELIZABETH HACKNEY	PO BOX 401
X Add			BROOKSVILLE, FL 34605
Remove			
3) X Change	<u>S</u>	LANNA BARTZ	PO BOX 401
Add			BROOKSVILLE, FL 34605
Remove			
4) Change	General	CAROLYN BRONSON	PO BOX 401
X Add		Delete As Sec	BROOKVILLE, FL 34605
Remove			
5) Change	General	THOMAS BRONSON	PO BOX 401
X Add	4 = = = = =		BROOKSVILLE, FL 34605
Remove			
6) Change			
Add			
Remove			

(att	ach additional sheets, if necessary). (Be specific)
EMP:	LOYER IDENTIFICATION NUMBER CHANGED ON SEPTEMBER 27, 2018 TO EIN: 83-1838403,
DLN	26053653005758, PUBLIC CHARITY STATUS: 170 (b) (1) (A) (vi), CONTRIBUTION DEDUCTIBILITY: YES.
IRS I	ETERMINED LEOPARD QUARTERBACK CLUB OF BROOKSVILLE INC. TO BE EXEMPT FROM FEDERA
INCC	ME TAX UNDER INTERNAL REVENUE CODE (IRC) SECTION 501 (C) (3)
_	
_	
<u></u>	

	04.21.2019	
The date of each amendme		, if other than the
date this document was sign		
Effective date if applicable	04.21.2019 e:	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date o	n this block does not meet the applicable statutory filing requirements, this date will not be in the Department of State's records.	e listed as the
Adoption of Amendment(s	s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was was/were sufficient for	s/were adopted by the members and the number of votes cast for the amendment(s) rapproval.	
There are no members adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
Dated	.09.2019	
Signature	the chairman of vice chairman of the board, president or other officer-if directors	-
hav	the chairman gr vice chairman of the board, president of other officer-if directors re not been selected, by an incorporator — if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
	MONTE PATTERSON	
	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	