## 166853

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

OA COLLEGIATE Umpires, INC.
853
ee are submitted for filing.
g this matter to the following:
Dennis m. mcComb
Name of Contact Person
FC U Firm/Company
803 Royal OAK Court Address
De Law D, FL. 32724 City/State and Zip Code
City/ State and Zip Code
Just miller 123 @ gmail. Com (to be used for future annual report notification)
(10 be 1500 to. talate dimant report notification)
ton whose sells
ter, please call:
b at 386 736-3736
at ( 386 ) 734-3736  Area Code & Daytime Telephone Number
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Fee & S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Street Address Amendment 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

SECKETARY OF SIGN

## Articles of Amendment to Articles of Incorporation of

## EFFECTIVE DATE ON/ON/2014

FLOR	DA COLLEGIA	Te Umpires INC
(Name of Corporation as cu		
L	66853	
(Document N	umber of Corporation (if k	nown)
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this Flo	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name	of the corporation:	
		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," or "Co	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
D. Entenness unincinal office address if a	nnlicable	7852 NW 62 ND Ter.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		PARKLAND, FL 33067
C. Enter new mailing address, if applicable (Mailing address MAYBE A POST OF)  D. If amending the registered agent and/onew registered agent and/or the new resistered agent.	FICE BOX) or registered office addres	PO Box # 970253  COCONUT Creek, FL 33097  s in Florida, enter the name of the
Name of New Registered Agent	Josh M.	LLer
ATMINE VIALET ALEGNIE, EM TAGETT	78 62 Nu	1 62 NO TOC
	(Florida street	address)
New Registered Office Address:	Parkland (Cin)	address)  , Florida 33067  (Zip Code) 7
New Registered Agent's Signature, if chan I hereby accept the appointment as registered		h and accept the obligations of the position $\mathbb{R}^{\frac{1}{2}}$
Signa	Orse Milb Mire of New Registered Ago	

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	<u>PT</u> John	ı Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>fs</u>	John MAGNUSSON	9230 SW 75 WAY
Add			GAINESVILLE FL 32608
Remove			
2) Change	VT	Dennis mcComb	803 ROYAL OAK COURT
Add			DOLAND, FL 32724
X Remove			
3) Change	PS	Rob Healey	210 HAWThorNe Groves BLUB APT #10
$\sum$ _ Add			Orlando FL 32835
Remove			**************************************
4) Change	VT	Josh Miller	7852 NW 62 NO Ter.
Add			7852 NW 62 TER. PARKLAND, FL 33067 PER 3
Remove			ALE 3
			AHAHAHAHAHAHAHAHAHAHAHAHAHAHAHAHAHAHAH
5) Change		The state of the s	ASSET
Add			
Remove			<u> </u>
6) Change	******		- 1 <sub>1</sub>
Add			
Pemove			

	(Be specific)
MANAGEMENT OF THE STATE OF THE	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
f an amendment provides for an exch.  provisions for implementing the amen  (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, udment if not contained in the amendment itself:
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: ////14	<del></del>
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by FCU (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/16/13	
Dated 12/16/13 Signature Dennis mm Comb	<del></del>
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Vice President / Treasurer (Title of person signing)	
(Title of person signing)	

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