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COVER LETTER *

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Fort White Qu	arterback Club, Inc	
DOCUMENT NUM	BER: N00000008404		
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		y D'Antonio	
	(Name of	Contact Person)	
	(Firm	n/ Company)	
	474 S	SW Flatt Gln	
	(,	Address)	
		City, FI 32024	
	(City/ Sta	te and Zip Code)	
	E-mail address: (to be use	d for future annual report notific	ation)
For further information	on concerning this matter, pleas	e call:	
Kathy D'Antonio		at (386) 590-918 (Area Code & Daytin	7
(Name	of Contact Person)	(Area Code & Daytin	me Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departmen	t of State:
□\$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)
Malling Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	r Circle

Articles of Amendment to Articles of Incorporation of

Fort White Quarterback Club, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

N0000008404

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Floridate following amendment(s) to its Articles of Incorporate A. If amending name, enter the new name of the	oration:	Profit Corporation adopts
The new name must be distinguishable and contain abbreviation "Corp." or "Inc." "Company" or "Co		ncorporated" or the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE B		SECHETARY OF STATE
D. If amending the registered agent and/or registonew registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:	onice address:	
New Registered Office Address:	(Florida street address)	
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Re hereby accept the appointment as registered agent position.		cept the obligations of the
Signati	ure of New Registered Agent. if c	hanging

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) <u>Title</u> **Type of Action** <u>Address</u> <u>Name</u> ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Amending Article II Section 1. Amending Article III Section II and Section III Article II Section I - Purpose and Objectives The purpose of the Fort White Quarterback Club, Inc is to help fund FWHS/FWMS football. (2) To help the teams, players, the consistents and the school, promote and improve its teams and facilities (3) To foster a positive image of FWHS/FWMS (4) To work with Columbia County School Board, the FWHS/FWMS Administrations, and all interested groups to build a better athletic program at FWHS/FWMS through financial and moral support (5) Encourage good fellowship and foster good sportsmanship (6) Encourage school and community spirit Article III - Membership Classifications

Section III - deleted

Section II - deleted

The date of each amendment(s) a	idoption: January 11, 2011
• •	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) l.
There are no members or mem adopted by the board of directors.	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated	7/11
Signature	Sori Putto
have no	chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)
	Lori Pitts
	(Typed or printed name of person signing)
<u></u>	President
	(Title of person signing)