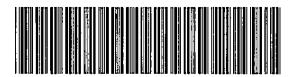
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(Document Number)
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R. WHITE. DEC 11 2019

COVER LETTER

TO: Amendment Section Division of Corporations

PINECREST PREMIER NAME OF CORPORATION:	SOCCER, INC.		
N0100000087			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
MANUEL ESCOBIO			
(Na	ime of Contact Po	erson)	
PINECREST PREMIER SOCCER, INC.			
	(Firm/ Company	y)	
13012 SW 85 AVENUE ROAD			
	(Address)		
MIAMI, FL. 33156			
(Cit	sy/ State and Zip	Code)	
manuel_escobio@ml.com			
E-mail address: (to be used for	future annual rep	oort notification)
For further information concerning this matter, please call	:		
MANUEL ESCOBIO	at	305	255-3422
(Name of Contact Person)	at		(Daytime Telephone Number)
Enclosed is a check for the following amount made payable	le to the Florida I	Department of S	State:
(/	43.75 Filing Fee ertified Copy Additional copy i enclosed)	Certifi s Certifi	O Filing Fee cate of Status ed Copy is sed)

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

to cles of Incorporation

PINECREST PREMIER SOCCER INC		2010 11511 11 511 5
(Name of Corporation as	currently filed with the Flor	
N01000000087		
(Document	Number of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	r Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	The new "" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>		
		·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	4	
(Mulling undress MAT BE A POST OFFICE BOX		_
		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent:		<u>-</u>
New Registered Office Address:	(Fla	orida street address)
		, Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered agent. I hereby accept the appointment as registered agent.		the obligations of the position.
	Signature of New Regist	ered 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 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>Mil</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	CHRISTOPHER GREEN	13012 sw 85 ave rd
Add			MIAMI, FL. 33156
X Remove			
2) Change			
Add			
Remove			
3) Change		-	
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			



E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	. <u></u> .		
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		<u> </u>		
	<u>., </u>			

Page 3 of 4

The date of each amendment(s) adoption	JULY 2, 2019 on:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	ses not meet the applicable statutory filing requirements, this date will not be sent of State's records.	: listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
There are no members or members e adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
Dated <u>09/13</u>	12019 11/1-	
Signature		
have not been set	or view of the board, president or other officer-if directors ected, by an incorporator – if in the hands of a receiver, trustee, or nted fiduciary by that fiduciary)	
,	(Typed or printed name of person signing)	
	PRESSPENT	
	(Title of person signing)	