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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	AADE INTERNATIONAL DC 	MINO CLUB	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	re submitted for filing.		
Please return all correspondence concerning thi	is matter to the following:		
JUNIOR DENNIS			
	(Name of Contact Perso	n)	
	(Firm/ Company)		
PO BOX 6896			
	(Address)		
NORTH PORT, FLORIDA, 34290			
	(City/ State and Zip Cod	e)	
KLUBRENEGADE@AOL.COM			
E-mail address: (to b	pe used for future annual report	notification)	
For further information concerning this matter,	please call:		
JUNIOR DENNIS	HOR DENNIS 9543092132 at		
(Name of Contact I	Person) (A	rea Code) - (Daytime Telephone Number)	
Enclosed is a check for the following amount n	nade payable to the Florida Dep	artment of State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fe Certificate of \$		■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amend Divisio	Street Address Amendment Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Snite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

THE RENEGADE INTERNATIONAL DOMINO CLUB INC.,

Name of Corporation as currently filed with the Florida E			
N01000002534	0.20		
(Document Number	er of Corporation (if known)		
Pursuant to the provisions of section 617,1006, Florida Statute mendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation 2	dopts the follow	wing
A. If amending name, enter the new name of the corporati	on:		
THE RENEGADE INTERNATIONAL DOMINO ASSOCIA	TION INC	The	reve
name must be distinguishable and contain the word "corporate Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation	"Corp." or "In	7
3. Enter new principal office address, if applicable:	N/A		
Principal office address <u>MUST BE A STREET ADDRESS</u>)			
Enter new mailing address, if applicable:	N/A		
(Mailing address <u>MAY BE A POST OFFICE BON</u>)			
 If amending the registered agent and/or registered office 	anddens in Florida onto the name of the	2021 Б.У	
new registered agent and/or the new registered office a		= = = = = = = = = = = = = = = = = = = =	
Name of New Registered Agent:		i:	
mane of the regime of a seem.			
	(Floribi Sic. et andress)	<u></u>	::
New Registered Office Address:	,,	9	-
N/A	Florida	կ 2	
		Codes	
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fan		contion.	
			_

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= Trustev; C = Chairman or Clerk, CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one tale, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc 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		Doe Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng additional A ets. if necessary)	rticles, enter change(s) here: . (Be specific)	
<u>N/A</u>			

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	····			
The date of each amendment(s) add	option:			. if other than the
date this document was signed.				
·				
Effective date <u>if applicable</u> :				
	ino more than 90 days a	fter amendment file date)		
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicabl artment of State's records.	e statutory filing requirement	uts, this date will not b	o listed at the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the	number of votes east for th	e amendment(s)	

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

Signature

05/03/2021