M0100000 4744

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



30033431823;

&S 35/14--0101F 901 **

2010 CED 23 FT 4-1

OCT 1 0 2019

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Timber wolves Baseball Brossers, Inc
DOCUMENT NUMBER: NO100004744
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Callie Griffin (Name of Contact Person)
(Name of Contact Person)
Timber wolves Baseball Boosters, Inc. (Firm/Company)
(Fintiv Company)
7200 Lawton Chiles Lane 12910 Kerry Firest Play Du
$\frac{Tallahassee FZ 32312/32309}{\text{(City/ State and Zip Code)}}$
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at 850 - 528 - 1414 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee \\ Certificate of Status \\ (Additional copy is enclosed) \\ (Additional Copy is Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

2019 500 20

	schall Boosters Inc.	Z, <u> </u>
(Name of Corporation a	as currently filed with the Florida Dept. of State)	
N0100000		
(Docume	ent Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	ida Statutes, this Florida Not For Profit Corporation adopts the foll	lov
A. If amending name, enter the new name of the c	corporation:	
	N/A	ie r
name must be distinguishable and contain the word ' "Company" or "Co." may not be used in the name.	"corporation" or "incorporated" or the abbreviation "Corp." or	
B. Enter new principal office address, if applicabl (Principal office address MUST BE A STREET AD		_
		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	BOX) N/A	
D. If amending the registered agent and/or registered new registered agent and/or the new registered	tered office address in Florida, enter the name of the	
Name of New Registered Agent:	NIA	
	(Florida street address)	_
_	(City) , Florida (Zip Code)	
New Registered Agent's Signature, if changing Reliable I hereby accept the appointment as registered agent.		
	Signature of New Registered Agent, if changing	_

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and	l title
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; CEC Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>1 Doe</u> <u>e Jones</u> y Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add Remove	<u>SEC</u>	Barbara Moore	2910 Kerry Forest D4-135 Tallahassee, F.
2) Change Add Remove	<u>_VP_</u>	Pat Sanford	_same
	<u>vp</u> _	Keith mcDonald	same
4) Change Add Remove	<u>VP</u>	Lip West	Same
5) Change Add Remove	<u>SEC</u>	Marcia Rudd	Same
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
N/A	
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	
	İ
	<u> </u>
	<u> </u>
	-
	
	<u> </u>

The date of each amendment(s) adoption: \$\\ \begin{array}{ c c c c c c c c c c c c c c c c c c c	if otl
Effective date if applicable: 8/19/19	
(no more than 40 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listec
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
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 9/3/19	
Signature Callie Audio	
(By the chairman or vice chairman of the board, president or other officer-if directors 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)	
(13ped of printed name of person signing)	
(Title of person signing)	