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COVER LETTER

Division of Corporations

BOB HAYES INVITATIONAL TRACK MEET, INC.

NAME OF CORPORATION:

N01000005331 DOCUMENT NUMBER:

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

YVONNE D. SMITH-DAY

(Name of Contact Person)

BOB HAYES INVITATIONAL TRACK MEET, INC.

(Firm/ Company)

5426 SOUTEL DRIVE

(Address)

JACKSONVILLE, FLORIDA 32219

(City/ State and Zip Code)

INVITATIONALB@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YVONNE D. SMITH-DAY

(Name of Contact Person)

904

at

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

🔳 \$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee
	Certificate of Status	Certified Copy	Certificate of Status
		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy is
			Enclosed)

Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

635-9643

	Article	es of Amendment	
	Article	to s of Incorporation of	FILED
BOB HAYES INVITATIONAL TRACK MEET,	INC.		2022 HAY 23 AH 5: 09
Name of Corporation as currently filed with th	e Florida I	Dept. of State)	
N01000005331			INTERACIÓN OF STATE
(Docur	nent Numb	er of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statute	es, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporat	ion:	TU
name must he distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incorporated"	The nev
B. Enter new principal office address, if applica	<u>ible:</u>	5426 SOUTEL DRIVE	
Principal office address <u>MUST BE A STREET A</u>	<u>IDDRESS</u>	JACKSONVILLE, FL	ORIDA 32219
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE</u>	<u>BOX</u>)	P.O. BOX 12285	
		JACKSONVILLE, FLO	
 If amending the registered agent and/or registered agent and/or the new registered 	ed office a	<u>ddress:</u>	nter the name of the
Name of New Registered Agent:	K. MARK	KALEEL	
<u>New Registered Office Address:</u>	2255 DUN	N AVENUE, SUITE 6	01 ida street address)
	JACKSON	VILLE	Deside 32218
		(Ciņy)	, Florida (<i>Zip Code</i>)
<u>Sew Registered Agent's Signature, if changing F</u> hereby accept the appointment as registered agen	Registered t. 1 am fan	Agent: niliar with and accept th	e obligations of the position.
	K	much ka	led
_		nature of New Register	

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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 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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeheld. 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT John D</u> V <u>Mike J</u> SV Sally S	lones	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
l) Change Add	D	GREGORY COLEMAN	3208 CLUB LAKE DRIVE ORANGE PARK, FL 32065
<u>×</u> Remove			JAMES DAY
$\begin{array}{c} 2) \\ \underline{} \\ \underline{} \\ \underline{} \\ Add \end{array}$	D	VAUGHN MCLAUGHLIN	5119 NORMANDY BLVD. JACKSONVILLE, FL 32205
X Remove 3) Change X Add X Remove	D	CLEVE WARREN	LEWIS SIPLIN 3061 SUNSET LANDING DR. JACKSONVILLE, FL 32226
4) Change Add			
<u>×</u> Remove			LEON OLDHAM
5) <u>×</u> Change Add	<u> </u>	CARLA L. SULLIVAN	4123 SANTEE ROAD JCKSONVILLE, FL 32209
Remove			
б) <u>×</u> Change Add	<u> </u>	YVONNE D. SMITH-DAY	8957 HARRISON AVENUE JACKSONVILLE, FL 32208
×_Remove			KIM HUBBARD
F. If amending or addit	ng additional Art	icles enter change(s) here:	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

<u>N/A</u>

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N/A		
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The date of each amendment(s) adoption:	APRIL 25, 2022	, if other than the
date this document was signed.		
• DD // D* 2		

Effective date if applicable: ______APRIL 25, 2022

(no more than 90 days after amendment file date)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

□ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

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MAY 16, 2022 Dated in. e/j Signature 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) MAURICE JONES (Typed or printed name of person signing) PRESIDENT

(Title of person signing)