N0200001365

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL.
(Bu	siness Entity Nar	me)
(Do	ocument Number)	,
Certified Copies	_ Certificates	s of Status
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and CC 3

NAME OF CORPOR	ATION: Florida Ama	teur Baseball Association, I	nc.
DOCUMENT NUME	ER: N02000001365		
The enclosed Articles	of Amendment and fee	are submitted for filing.	
Please return all corres	pondence concerning th	nis matter to the following:	
James			
	(Name	of Contact Person)	
Florida /		Association, Inc	
	(F)	irm/ Company)	
2700 Ba	nyan Road, C2		
		(Address)	
Boca R	aton, Florida 33432		
•	(City/ S	State and Zip Code)	
For further information	concerning this matter,	please call:	
lames Cowen		at (561) 452-19	09
(Name of C	ontact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a check for	the following amount n	nade payable to the Florida De	partment 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)
Mailing Addre		Street Address	

Florida Amateur Baseba		
, (Name of Corporation as currently filed wit	<u>h the Florida Dept. of S</u>	tate)
N0200000	1365	
(Document Number of Corpor	ation (if known)	_
Pursuant to the provisions of section 617.1006, Florida Statut the following amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i>	Profit Corporation adopts
A. If amending name, enter the new name of the corporat	<u>ion:</u>	
NA		a
The new name must be distinguishable and contain the wor abbreviation "Corp." or "Inc." <u>"Company" or "Co." may n</u>		corporated" or the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	NA NA	
	***************************************	DINIS
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	SAR OF CORP.
D. If amending the registered agent and/or registered office	ce address in Florida, e	nter the name of the
new registered agent and/or the new registered office a		
Name of New Registered Agent: NA		·
New Registered Office Address: (Flo	orida street address)	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I amposition.		ept the obligations of the
Simulation of Ma	Darietaund Amout if al	moiso

	nd title, name, and addres itional sheets, if necessary)	s of each Officer and/or Director being	added:
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u></u>	<u>NA</u>		Add Remove
			Add Remove
	·		
	ling or adding additional dditional sheets, if necessar	Articles, enter change(s) here: y). (Be specific)	
a) Said or	ganization is organized	l exclusively for charitable, religiou	s, educational,
and scient	tific purposes including	, for such purposes, the making of	distributions to
organizatio	ons that qualify as exe	mpt organizations under section 50	01 (c) (3) of the
Internal Re	evenue Code, or corre	sponding section of any future fede	eral tax code.
b) Upon th	ne dissolution of the org	ganization, assets shall be distribu	ted for one or more
		ning of section 501 (c) (3) of the In	
		future federal tax code, or shall be	
		or local government, for a public p	·
		isposed of by the Court of Commo	
			To-
		e organization is then located, excl	
		or organizations, as said Court sh	iali determine, which
are organi:	zed and operated excl	usively for such purposes.	
·			

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Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer was/were sufficient for appr	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or n adopted by the board of directions	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Dated <u>12/3</u> Signature	0/2008 Ames Mayon
(By	the chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	James M Cowen (Typed or printed name of person signing)
	President (Title of person signing)

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