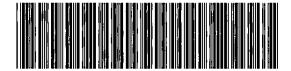
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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

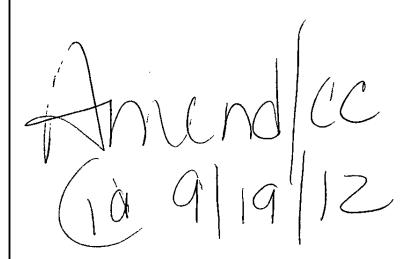
Office Use Only



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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION:	Cleam	ont yo	eth bo	Hose + Cheeleading
DOCUMENT NUMBER:	N	<u>020000</u>	X) 493:	3
The enclosed Articles of Amendmen	and fee are subm	nitted for filing.		
Please return all correspondence con-	cerning this matte	r to the followin	g:	
	Josei	Baxer		
	(Name of Contact	ct Person)	
	Liberty	Tax &	Sperice	2
	((Firm/ Com	pany)	
	42-79	S Huy	27	Suto C
		(Address	3)	,
	Clerm	ont 9	347	7]]
	Ų	City/ State and 2	Zip Code)	. '
E-mail add	dress: (to be used	a liber l	Ley Loux Toeport notif	fication)
For further information concerning the	ic matter place (المح		
or rurater anormation concerning a	ins matter, please (zan.		
Loci E	Baken	at (352	536-1829
(Name of Contact Per	son)	(Area Code d	& Daytime Telephone Number)
Enclosed is a check for the following	amount made pay	able to the Flori	ida Departm	ent of State:
□ \$35 Filing Fee □\$43. Certi	75 Filing Fee & Gificate of Status	\$43.75 Filing I Certified Copy (Additional copy enclosed)	, py is	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
B# 111 4 1 1				

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

(Name of Corporation as currently filed with the Flo	toall & Cheekleading Coeparation
N020000	048 <u>3</u> 3
(Document Number of Corpora	ation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
N/0	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	S 99
	——————————————————————————————————————
C. Enter new mailing address, if applicable:	N/A 星窦
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	9.
D. If amending the registered agent and/or registered offic	a address in Florida, enter the name of the
new registered agent and/or the new registered office a	
Name of New Registered Agent: V/A	
	(Florida street address)
New Registered Office Address:	
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligations of the position.
Ci	and to see if the see
Signature of New Registo	erea Agent, ij 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 <math>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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add Remove	-		
5) Change Add			
Remove 6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	·.
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes	
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	_
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The amendment(s) was/were adopted by the members and thenumber 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 Signature (By the chairman or vice chairman of the board, president or other officerif directors have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Antonio Caeaaaa (Typed or printed name of person signing)	The date of each amendment(s) adoption; 9/7/12
Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the members and thenumber 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 Signature (By the chairman or vice chairman of the board, president or other officerif directors have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Antonio Case and (Typed or printed name of person signing)	Effective date if applicable:
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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 (By the chairman or vice chairman of the board, president pr other officerif directors have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Antonio Clarage of Cyped or printed name of person signing) Carage of Cyped or printed name of person signing)	Adoption of Amendment(s) (CHECK ONE)
Dated Signature (By the chairman or vice chairman of the board, president brother officerif directors have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Antonio Caegano (Typed or printed name of person signing)	
Signature (By the chairman or vice chairman of the board, president or other officerif directors have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Antonio Caecaro (Typed or printed name of person signing)	There are no members of members entitled to vote on the amendment(s). The amendment(s) was were
have not been selected, by an incorporator – ivin the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Antonio Caro pro (Typed or printed name of person signing) Resident	In
(Typed or printed name of person signing) President	have not been selected, by an incorporator - it in the hands of a receiver, trustee, or
President	
	(Typed or printed name of person signing) (Title of person signing)