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COVER LETTER

TO: Amendment Section Division of Corporations		•				
NAME OF CORPORATION	: Antioc	h Redskin	s c	of Plant C.	1+9 In	آک
DOCUMENT NUMBER:	NØ2ØØ	ØØØ5Ø	86			
The enclosed Articles of Amen	dment and fee are subm	nitted for filing.				
Please return all correspondence	e concerning this matte	r to the following:				
Emily	Sikes	(Name of Contact Persor	<u> </u>			
NIA		·				
		(Firm/ Company)				
802 3	Shangr	(Address)	<u>D</u> (
Sellner.	FL	33584				
		(City/ State and Zip Code	e)			2
ARS Pres	ident@C	for future annual report	M		17	
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For further information concern	ing this matter, please	call:			Ö	1375
Emily Si	KES ame of Contact Person)	atat	rea Code)	<u>489 0082</u> (Daytime Telephone No	umber) 15	EF STA
Enclosed is a check for the following			•		် <u>လ</u> လ	Light.
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\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	0 Filing Fee icate of Status ied Copy tional Copy is used)		
Mailing Add Amendment			Address Iment Secti	on		
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Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327



May 25, 2017

EMILY SIKES 802 SHANGRI LA DR SEFFNER, FL 33584

SUBJECT: THE ANTIOCH REDSKINS OF PLANT CITY INC.

Ref. Number: N0200005006

We have received your document for THE ANTIOCH REDSKINS OF PLANT CITY INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 517A00010614

Stected! thank you

Articles of Amendment

Articles of Incorporation Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 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	PT John	Doe	
X Remove	V Mike	<u>Jones</u>	
X Add	SV Sally	v Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PT	Emily Sikes	802 Shangri La Dr.
X Add		•	Seffner, FL. 33584
Remove			
2) Change	VP	Adam Cain	3401 Jernigan Ln. Dover, FL. 33527
Remove			
3) Change	PT	Tammie Medina	6420 Holloman Brook CT Plant City, FL. 33565
Remove			
4) Change Add	VP	Josh Young	1503 Tozter Place Plant City, FL. 33563
Remove			,
5) Change Add	2VP	mikey Wilkinson	4120 Silver Lune Valrico, FL 35594
Remove			
6) Change	_S	Brandi Hitchner	5356 Bobsmith Ave.
Add			Plant City, FL. 335 US
× Remove			

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

The date of each amendment(s) adoption: date this document was signed.	<u> </u>	_, if other than the
Effective date if applicable: (no n	nore than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of	meet the applicable statutory filing requirements, this date will not be State's records.	be listed as the
Adoption of Amendment(s) (CH	IECK ONE)	
The amendment(s) was/were adopted by the was/were sufficient for approval.	ne members and the number of votes cast for the amendment(s)	
There are no members or members entitled adopted by the board of directors.	to vote on the amendment(s). The amendment(s) was/were	
Dated 4-27-17	7	
	e chairman of the board, president or other officer-if directors by an incorporator – if in the hands of a receiver, trustee, or	
	iduciary by that fiduciary)	
Emily	(Typed or printed name of person signing)	
Proside	(Title of person signing)	