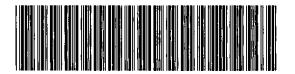
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MÁIL
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Certified Copies	Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations		
NAME OF CORPORATION: WINTER S	PRINGS YO	UTH SPORTS INC
DOCUMENT NUMBER: NO3000009	078	
The enclosed Articles of Amendment and fee are subr	mitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
BRIAN SCALES		
	(Name of Contact Persor)
WINTER SPRINGS YOU	JTH SPORT	TS INC
	(Firm/Company)	
P.O. BOX 195221		
	(Address)	
WINTER SPRINGS, FL	32719-5221	
	(City/ State and Zip Code	e)
bamescales@em		
E-mail address: (to be used	·	notification)
For further information concerning this matter, please	call:	
BRIAN SCALES	_{at (} 407	340-2209 de & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	rtment 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of

WINTER SPRINGS YOUTH SPOR	
(Name of Corporation as currently filed with the F NO300009078	lorida Dept. of State)
(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 617,1006, Florida Statt amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:
	The new
name must be distinguishable and contain the word "corpor <mark>t"</mark>	ration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.	SEC Z
rrincipal office address <u>MOST BE A STREET ADDRES.</u>	2)
	<u> </u>
C. Enter new mailing address, if applicable:	2 2 2 3
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent:	
Name of New Negative a rigeri.	
New Registered Office Address:	(Florida street address)
	, Florida
(Cia	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Signature of New Reg	gistered Agent, if 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 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 Do Mike Jo Sally Sr	nes	
Type of Action (Check One)	Title		<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				
_		_		100
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) SAID ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE.

The	e date of each amendment(s) adoption: OCTOBER 1S1, 2012	
Effe	ective date if applicable: OCTOBER 1ST, 2012	
	(no more than 90 days after amendment file date)	-
ملما	ontion of Amendment(s) (CHECK ONE)	
Auc	option 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 Oct 01, 2912 Signature Col	
	(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)	
	BRIAN SCALES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	