N03077

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)
(D	ocument Number)	
Certified Copies	Certificates of	f Status
Special Instructions to	o Filing Officer:	

Office Use Only



100333380381

09/04/13--01010--008 **81.25

Amundlus

NOV 0 2 2019 I ALBRITTON

COVER LETTER

Division of Corporations Dinecrest Little League, DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: necrest i Heleague fl a gmail. com E-mail address: (to be used for future annual report not Natation) For further information concerning this matter, please call: luzanne Casteel 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 & Certificate of Status Certified Copy ■\$52.50 Filing Fee Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

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



September 16, 2019

BILL CLINTON 9312 SR 39 SOUTH PLANT CITY, FL 33567

SUBJECT: PINECREST LITTLE LEAGUE, INC.

Ref. Number: N03677

P.C. BOX 733 1:thia, Fl 3:354

We have received your document for PINECREST LITTLE LEAGUE, INC. and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Limited Partnership, but your entity is a Florida Non-Profit Corporation. Please complete and return the enclosed blank form(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.

Irene Albritton Regulatory Specialist II

Letter Number: 919A00019127



October 1, 2019

BILL CLINTON 2nd mailing P.O. BOX 733 LITHIA, FL 33547

SUBJECT: PINECREST LITTLE LEAGUE, INC.

Ref. Number: N03677

We have received your document for PINECREST LITTLE LEAGUE, INC. and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Limited Partnership, but your entity is a Florida Non-Profit Corporation. Please complete and return the enclosed blank form(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.

Letter Number: 919A00019127

Irene Albritton
Regulatory Specialist II

www.sunbiz.org

Articles of Amendment

to

Articles of Incorporation

ATTICLS	of .
Pinecrest Little 1	eague. Inc.
	ly filed with the Florida Dept. of State)
N0367	7
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	<u> </u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	· · ·
C. Enter new mailing address, if applicable:	· ·
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	<u> </u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office agent.	
	Janne Casteel
A 2 12	2 Pouth County DA 39
<u> 131</u>	(Florida streenadress)
New Registered Office Address:	_
L'	1thia , Florida 33547
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligations of the position.
	Castlel
—————Sig	gnature 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 = 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	PT John D. V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u> Presid</u> ent	William Clinton	9312 South CR 39 Lithia, FL 33547
Remove			
2) Change		Jody Shiver	9312 South CR 39 Lithia, FL 33547
		Nancy Bregg	9312 South CR 39 Lithia, FL 33547
X Remove			
4) Change		Amarda Terry	9312 South CR 39 Lithia, FL 33547
X Remove			
5) Change Add		Heath Staiger	9312 South CR39 Lithia, FL 33547
X Remove		0 .1 0 .	
6) Change	<u>Jeoret</u> ary	Ruth Davis	9312 South CR39 Lithia, FL 33547
Remove		Page 2 of 4	

Drooks Baxter

9312 South CR 39

		(Be specific)	•				
							-
•							
· · · · · · · · · · · · · · · · · · ·		·					
					 _		
			-		•		
					-		

· · · · · · · · · · · · · · · · · · ·							
			•				_

	his document was signed. tive date if applicable:	
Effect	tivo dato if applicables	
	uve date ii applicable.	
	(no more than 90 days after amendment file date)	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.	listed as the
Adop	otion 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 10 28 19	
	Signature Master	
	(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)	
	<u>Juranne Casteel</u> (Typed or printed name of person signing)	
	Vice President, Pinecrest Little Leage	qie