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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

• Division of Corporations
NAME OF CORPORATION: North Port Youth Basketball Inc.
DOCUMENT NUMBER: NO600005701
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Andrew Baker (Name of Contact Person)
North Port Yorth Backet by V
2580 Vercle ter. (Address)
(Address) North Port Florida 34286 (City/ State and Zip Code)
E-mail address: (to be used for future annual report noutheation)
For further information concerning this matter, please call: Andrew Baker at (941) 380-0738
(Name of Contact Person) at (941) 380-0738 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& Certificate of Status Certified Copy (Additional copy is enclosed) \$\Bigcup \\$35 Filing Fee \& Certified Copy (Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incorporation

	of
(Name of Corporation as currently filed with the Florida	st Youth Basketball, Inc.
0/0/0	00005701
	ber of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporate	tion:
	The new
name must be distinguishable and contain the word "corpora "Company" or "Co," may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>	920
	1 00
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX)</u>	
	·
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	1 Agent: amiliar with and accept the obligations of the position.
S	Signature of New Registered Agent, if changing

ficer and/or Dire ; if necessary) rector title by the President; T= Tre = Chief Financial	ctor being added: first letter of the office title: asurer; S= Secretary; D= Director; TR= Tri Officer. If an officer/director holds more the	director being removed and title, name, ustee; C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office
wes the corporation	on, Sally Smith is named the V and S . These s	PST and Mike Jones is listed as the V. There is chould be noted as John Doe, PT as a Change.
Y Mike J	ones	
Title	Name	Address
_D	Scott W. Biensek	
		North Part, Fl 34286
teped o	town as a Director	od as a Director - and needs to be
	if necessary) irector title by the President: T = Tre Chief Financial ir, Director would in the following invest he corporation and Sally Smith PT John E Y Mike I SY Sally S Title	rector title by the first letter of the office title: President: T= Treasurer; S= Secretary: D= Director; TR= Treesther; Director would officer. If an officer/director holds more the property of the following manner. Currently John Doe is listed as the was the corporation, Sally Smith is named the V and S. These so and Sally Smith, SV as an Add. PT John Doe Y Mike Jones SY Sally Smith Title Name D Scott W. Brenick Denick Title Name D Scott W. Brenick These sectors of the present of the pre

		
		
		
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date this document was signed.	on:	if other than the
	(11120	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department	ses not meet the applicable statutory filing requirements, this date will not be nent of State's records.	listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

构	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 6/4/20
	Signature and But
	(By the chairman of 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)
	Antrew Baker
	(Typed or printed name of person signing)
	Disector / President (Title of person signing)