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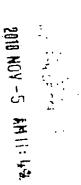
		
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COVER LETTER

TO: Amendment Section Division of Corporations

Baker Bulldogs At NAME OF CORPORATION:	thletic Booster, Inc			NON BING
N06000006770				2
DOCUMENT NUMBER:				'n
The enclosed Articles of Amendment and fee are su	abmitted for filing.			7
Please return all correspondence concerning this ma	atter to the following:			
Susan McNanan				
	(Name of Contact Pe	erson)	<u> </u>	
Baker Bulldogs Athletic Boosters, INC				
	(Firm/ Company	·)		
P O Box 152683				
	(Address)			
Cape Coral Fl 33915				
	(City/ State and Zip	Code)		
Blackandbluetdcrew@gmail.com				
E-mail address: (to be us	sed for future annual rep	ort notification	1)	
For further information concerning this matter, pleas	se call:			
Susan McNanan	at	239	910-4765	
(Name of Contact Person		(Area Code)	(Daytime Telephone N	umber)
Enclosed is a check for the following amount made	payable to the Florida I	Department of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	& □\$43.75 Filing Fee s Certified Copy (Additional copy is enclosed)	Certif S Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section		eet Address nendment Sect	on	
Amendment section	District CO of the control of the co			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



All MOV 5 MAIL TO Baker Bulldogs Athletic Booster INC (Name of Corporation as currently filed with the Florida Dept. of State) N06000006770 (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: (Florida street address) New Registered Office Address: , Florida ___ (Zip Code) 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.

Signature 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.

Exam <u>X</u> Cl <u>X</u> Re <u>X</u> A	hange emove	<u>V</u>	John Doe Mike Jones Sally Smith	
Type (Chec	of Action k One)	Title	<u>Name</u>	<u>Addres</u> s
1)	Change	TR	Jennifer Garner	3500 Aquilinda Blvd
	Add			Cape Coral Ft 33914
<u>x</u>	Remove			
2)	Change			
_	Add			
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	10/02/2018	ir a a a
The date of each amendment(s) late this document was signed.	adoption:	, if other than the
[1] Effective date <u>if applicable</u> :	0/02/2018	
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will a Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appr	e adopted by the members and the number of votes cast for the amendment(s) oval.	
There are no members or me adopted by the board of directions.	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.	
10/02/20 Dated	018	
* Signature	911	
(By the El have not	harman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or	
other cou	urt appointed fiduciary by that fiduciary)	
Susan	n McNanan	
	(Typed or printed name of person signing)	
Presic	lent	
•	(Title of person signing)	

. . . .