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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPOR	ATION: Buchholz Base	ball B	ooster	s		
DOCUMENT N	NUMBI	er: N07000009593					
The enclosed Ar	ticles o	f Amendment and fee are subr	nitted fo	r filing.			
Please return all	corresp	ondence concerning this matte	er to the	following	g:		
-			H. We			_	
		(Name of C	Contact I	Person)			
		Buchholz Bas	eball B	oosters	, Inc		
. "			Compar				
_		P.O. B	ox 357	134			
·		(A	ddress)				
_		Gainesvil					
		(City/ State	and Zip	Code)			
_		dandjwe E-mail address: (to be used	bb@co	x.net	ranort	notificatio	n)
For further infor	mation	concerning this matter, please		ic aimuai	report	nomeano	ii)
David H. Web			at (_		/	9-1861	
()	Name of	Contact Person)		(Area	Code &	Daytime	Telephone Number)
Enclosed is a cho	eck for	the following amount made pa	yable to	the Flori	da Dep	artment of	State:
☑\$35 Filing Fe		□ \$43.75 Filing Fee & Certificate of Status	Certi (Add	3.75 Filii fied Copy itional co osed)	ppy is		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Amendr Division P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314		Amend Division Clifton 2661 E	Buildi: Executiv	ection orporations	rcle

Articles of Amendment to Articles of Incorporation of

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	DEC	11	 BM	<i>U</i>	
SECI	EIA	AV.	J#	Q:	14

	ball Boosters, Inc.	State) State) ARY OF S
(Name of Corporation as current	<u>ly filed with the Florida Dept. of S</u>	State) TAMASSEE. FL
N0700	0009593	
(Document Numbe	er of Corporation (if known)	
suant to the provisions of section 617.1006, Flor following amendment(s) to its Articles of Income		Profit Corporation adop
If amending name, enter the new name of th	e corporation:	
e new name must be distinguishable and cont previation "Corp." or "Inc." <u>"Company" or "</u>		
Enter new principal office address, if applicincipal office address <u>MUST BE A STREET</u>		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE		
If any and the state of the sta	internal office address in Florida	anton the name of the
If amending the registered agent and/or reg new registered agent and/or the new registe		enter the name of the
Name of New Registered Agent:	David H. Webb	
	1924 NW 89th DR	
New Registered Office Address:	(Florida street address)	
	Gainesville	, Florida 32606
	(City)	(Zip Code)
w Registered Agent's Signature, if changing	Pagistared Agent	
ereby accept the appointment as registered a		cept the obligations of
sition.		11

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	Chatman, Alan	6838 SW 90th ST Gainesville, FL 32608	□ Add ☑ Remove
<u>VP</u>	Charleston, Melvin G	1036 NE 4th ST Gainesville, FL 32601	
<u>s</u>	Allen, Ginny	1524 SW 115th ST Gainesville, FL 32607	☐ Add ☐ Remove
(attach	nding or adding additional Articles, e additional sheets, if necessary). (Be s (See Attached)		

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	Charleston, Melvin G.	1036 NE 4th ST Gainesville, FL 32601	☑ Add □ Remove
<u>VP</u>	Griffin, Kevin	12310 SW 9th Ave Gainesville, FL 32669	☑ Add □ Remove
<u>VP</u>	Stone, R. Craig	5918 NW 44TH PL Gainesville, FL 32606	☑ Add □ Remove
(attach ad	ing or adding additional Articles, editional sheets, if necessary). (Be so The Care (SEE AMACHED)		

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>s</u>	Clarke, Karen	6725 NW 34th Way Gainesville, FL 32653	☑ Add □ Remove
(attach a	ding or adding additional Article dditional sheets, if necessary). (See Attached)	es, enter change(s) here: (Be specific)	·
			.
			
	-		

Buchholz Baseball Boosters, Inc. P. O. Box 357134
Gainesville, FL 32635

NonProfit Ammendment Section: E

Document Number: N07000009593

Article III

The specific purpose for which this corporation is organized is to serve, organize, and promote all fundraising and administrative activities for the Buchholz High School Baseball Teams.

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 tax exempt organizations under section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future code.

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assts not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

The date of each amendment(s	s) adoption: December 10, 2009
`	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for approx	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or madopted by the board of dire	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated Dece	mber 10, 2009
Signature	DX how
(By t	he chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, o court appointed fiduciary by that fiduciary)
	David H. Webb
	(Typed or printed name of person signing)
	Treasurer
	(Title of person signing)

Page 3 of 3