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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Cobra Spirit Booster Club			
DOCUMENT NUMBER: NO8 000007562			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Dayn Jones			
(Name of Contact Person)			
Cobra Spirit Booster Club			
(Firm/ Company)			
(056) SW 76 TCT. (Address)			
(Address)			
So, Miami FL 33143 (City/State and Zip Code)			
(City/ State and Zip Code)			
E-mail address: (to be used for future annual report notification)			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person)  at 336-8760  (Area Code) (Daytime Telephone Number)			
(Name of Contact Person) (Area Code) (Daytime Telephone Number)			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
Status Certificate of Status Certificate of Status (Additional copy is enclosed)  Status Certificate of Statu			

Mailing Address
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

## Articles of Amendment to

Artic	les of Incorporation	
_	of -	
Cobra Spirit	Booster	Club
(Name of Corporation as curr	ently filed with the Florida	Dept. of State)
N0800000	7562	
(Document Nun	nber of Corporation (if know	n)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:		ofit 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	ration" 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 <u>MUST BE A STREET ADDRES.</u>	<u>S</u> )	
	<del></del>	
C. Enter new mailing address, if applicable:		<b>≥</b> ∰ 5
(Mailing address MAY BE A POST OFFICE BOX)		
		Chill -
		rand Or
	· · · · ·	
D. If amending the registered agent and/or registered of	fice address in Florida, ento	er the name of the
new registered agent and/or the new registered office	address:	- BE T
V (N B to I A		A +
Name of New Registered Agent:		<del></del>
	(Florida	street address)
New Registered Office Address:		
	(Circl	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere	d Agent:	
I hereby accept the appointment as registered agent. I am j		obligations of the position.
	1	
	Signature of New Registered	l 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 J           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	VP_	Elizabeth ferrondez	7227 S. Waterway Dr. Miami, PL 331SS
2) Change Add	<u> </u>	Amy Pellien	8530 nw 3rd In Unit 8 Micami, PL 33,26
Remove 3)ChangeAdd			
Remove 4) Change Add			
Remove  5) Change Add			
Remove		·	
Add Remove			

If amending or adding additional Articular additional sheets, if necessary).	(Be specific)	
<del></del>		
		_
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The date of each amendment(s) adoption:		, if other than the	
late this document was signed.			
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	·	
Note: If the date inserted in this blo locument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s).		
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were ars.		
Dated	11-12-18		
Signature	Dun Ofrus	<del></del>	
(By the chair have not be	man or vice chairman of the board, president or other officer-if directors en selected, by an incorporator ~ if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)		
	Dawn Jones		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		