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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

BIT AND SPUR CLUB O NAME OF CORPORATION:	F CENTRAL B	REVARD IN	C
N0900003658 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	for filing.		-
Please return all correspondence concerning this matter to the	-		
TRACEY C HIGGINBOTHAM	_		
(Name	e of Contact Pers	ion)	
HIGGINBOTHAM COMPANIES INC			
(F	Firm/ Company)		
3790 N US 1			
	(Address)		
COCOA FL 32926			
(City/	State and Zip Co	ode)	
TCHIGGINBOTHAM@HIGCOINC.COM			
E-mail address: (to be used for ful	iure annual repor	rt notification	
For further information concerning this matter, please call:			
TRACEY C HIGGINBOTHAM	3 at	321	632-5726
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made payable t	o the Florida De	partment of S	tate:
(Ad	.75 Filing Fee & iffied Copy ditional copy is losed)	Certifi Certifie	Filing Fee cate of Status ed Copy onal Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amer Divis	et Address ndment Sectionsion of Corpor on Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

(Name of Corneration as a	currently filed with the Florida Dept. of State)	
N0900003658	sarrends med with the Florida Dept. of State	
<u> </u>	Number of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida	Statutas this Elanida Not East Draft Communication of	ante tha fallanina
unendment(s) to its Articles of Incorporation:	Statutes, this Prortae two For Fright Corporation an	opts the tollowing
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "	Corp " or "Inc."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u>	RESS)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		<u> </u>
		<u> </u>
		<u> </u>
D. If amending the registered agent and/or registere		
new registered agent and/or the new registered o	three address:	
Name of New Registered Agent:		<u> </u>
		E A
No. 9 sign of O'Co. Ohm	(Florida street address)	
<u>New Registered Office Address</u> :		
	, Florida	
	(City) (Zip C	ode)
New Registered Agent's Signature, if changing Regis		
hereby accept the appointment as registered agent. I	am familiar with and accept the obligations of the p	osition.
	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.

Example: X_Change X_Remove X_Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add			
Remove 6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
AMENDMENT TO ARTICLE III - PURPOSE(S):
Remove in its entirety "Equine Riding Club".
Replace with the following: Provide an avenue for horse enthusiasts, of all ages, to participate in equestrian
training, team sports, and education activities through shows, clinics, and seminars.
ADD ARTICLE IX:
The organization is organized exclusively for charitable purposes, including the making
of activities to the public that qualifies as an exempt organization under section 501(c)3 of the Internal
Revenue Code, or corresponding section of any future tax code or amendments thereof. Upon dissolution
of the organization, assets shall be distributed for one or more exempt purposes within the meaning of
Section 501(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 assets not disposed of shall be disposed of by the Court of Common Pleas in Brevard County.
Florida, exclusively for such purposes or to such organization or organizations, as said Court shall determine.
which are organized or operated exclusively for such purposes.

The	e date of each amendment(s) adoption:	, if other than the
date	e this document was signed.	
Eff	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will tument's effective date on the Department of State's records.	I not be listed as the
Ade	option of Amendment(s) (<u>CHECK ONE</u>)	
=	The amendment(s) was/were adopted by the members and the number of votes east 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 12/5/18	
	Signature March 2th	
	(By the chairman or fice 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)	
	Stacy Marchett (Type) or printed name of person signing)	
	(Typell or printed name of person signing)	
	Secretary (Title of person signing)	
	(Title of pelson signing)	