## N1000001795

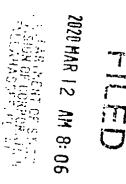
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City, Cathering, Mene by
PICK-UP WAIT MAIL
(Durings Calibration)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400341701304

03/12/20--01008--019 \*\*43.75



MAR 2 7 2020 S. YOUNG

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>SOUTH M</u>	ENENDEZ ATHLETIC ASSOCIATION
DOCUMENT NUMBER: N10000001795	
The enclosed Articles of Amendment and fe	e are submitted for filing. Please return all correspondence concerning this matter
to the following:	
EVERETT WILLIAMS	
	(Name of Contact Person)
SOUTH MENENDEZ ATHLETIC ASSOC	CIATION
	(Firm/ Company)
540 DALLAS RD.	•
	(Address)
HASTINGS,FLORIDA 32145	
	(City/ State and Zip Code)
EVERETTWILLIAMS72@YAHOO.COM	
E-mail address: (i	to be used for future annual report notification)
For further information concerning this matt	er, please call:
EVERETT WILLIAMS	at (904)826-6138
(Name of Conta	ct Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amoun	it made payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Certificate o	- · · · · · · · · · · · · · · · · · · ·
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations

Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Amendment Section

Division of Corporations

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SOUTH MENENDEZ ATHLETIC ASSOCIATION INC	·	
(Name of Corporation as currently filed with the Florida	Dept. of State)	
N10000001795		
(Document Nun	iber of Corporation (if known	)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:		fit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:	
	ration" or "incornarated" or	the abbreviation "Corn" or "Inc."
"Company" or "Co." may not be used in the name.	them in incorporated in	~
B. Enter new principal office address, if applicable:	540 DALLAS RD	020
(Principal office address MUST BE A STREET ADDRES	S) HASTINGS,FL 32145	## ## F
	11/A3 (18 Q3), 1. 32 143	770 2
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	540 DALLAS RD	
	HASTINGS,FL 32145	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		r the name of the
<u>Name of New Registered Agent;</u> EVERI	ETT WILLIAMS	
540 DA	ALLAS RD	
New Registered Office Address:	U Torida s	Areet address)
HASTI	INGS	Florida = 32145
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere	od Auent	
I hereby accept the appointment as registered agent. Lam,		bligations of the position.
Leve	utt Willin	
3/	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	PT         John Do           Y         Mike Jo           SV         Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add X Remove	<u> </u>	SHAUN PREVATT	P.O.BOX 332 HASTINGS,FL 32145
2) Change X Add	T	RENNE WILLIAMS	540 DALLAS RD HASTINGS,FL 32145
Remove   3   X Change   Add   Remove	P	EVERETT WILLIAMS	540 DALLAS RD HASTINGS,FL 32145
4) <u>X</u> Change Add		EARNEST FORTSON	540 DALLAS RD HASTINGS, FL 32145
Remove 5) X Change Add		ROSE CHESTNUT	540 DALLAS RD HASTINGS,FL 32145
Remove 6) Change Add	-		
E. If amending or adding (attach additional shee	ig additional Arti	cles, enter change(s) here: (Be specific)	
	<u>.</u>		

* *	•	
The date of each amendment date this document was signed	(s) adoption: MARCH 7, 2020	, if other than the
Effective date if applicable:	MARCH 7, 2020	
	tno more than 90 days after amendment file	date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory fifing re- ne Department of State's records.	quirements, this date will not be listed as the

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

Adoption of 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 MARCH 7, 2020
Signature Little William  (By the chairman or 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)
EVERETT WILLIAMS
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)