

N10000005312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

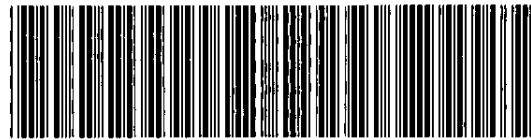
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Amend

FILED

10 DEC 13 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts DEC 15 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: KEY BISCAINE SOCCER CLUB, INC.

DOCUMENT NUMBER: N/ 000 000 5312

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SOFIA SOHL
(Name of Contact Person)

KEY BISCAINE SOCCER CLUB
(Firm/ Company)

P.O. BOX 491574
(Address)

KEY BISCAINE, FL. 33149
(City/ State and Zip Code)

TREASURER@KEYBISCAINESOCCERCLUB.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacqueline Kellogg at (305) 972-2222
(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:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☒ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

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
Articles of Incorporation
of

Key Biscayne Soccer Club, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

N/0000005312

(Document Number of Corporation (if known))

FILED
10 DEC 13 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

The new 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**)

370 Woodcrest Rd.
Key Biscayne, FL
33149

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

P.O. BOX 491574
Key Biscayne, FL
33149

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:

Sofia Sohl

New Registered Office Address:

370 Woodcrest Rd.
(Florida street address)

Key Biscayne, Florida 33149
(City) (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.

Sofia Sohl

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>	<u>Address</u>	<u>Type of Action</u>
President	JOSE LOPEZ	330 W. ENID DR. KEY BISCAYNE, FL 33149	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
President	SOFIA SOHL	370 WOODCREST RD. KEY BISCAYNE, FL 33149	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Treasurer	MARCELO RADICE	512 WARREN LN. KEY BISCAYNE, FL 33149	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

Treasurer RICHARD KLAPPEN 155 Sunrise Dr. #2B
KEY BISCAYNE, FL 33149 ☐ Add ☒ Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Secretary JACQUELINE KELLOGG 115 Sunrise Dr. #5A ☒ Add
KEY BISCAYNE, FL 33149 ☐ Remove

Secretary MARCELO RADICE 512 WARREN LN ☐ Add
KEY BISCAYNE, FL 33149 ☒ Remove

The date of each amendment(s) adoption: 12/10/10
(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 adopted by the members and the number of votes cast 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 12/10/10

Signature [Signature]
(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)

SOFIA SOMA
(Typed or printed name of person signing)

President
(Title of person signing)