N10000009730

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
		•
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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C.Lewis 1-2-14

COVER LETTER

Division of Corporations		•	
NAME OF CORPORATION: Key West (Girls Softball Red	creational League, Inc.	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	ibmitted for filing.		
Please return all correspondence concerning this ma	ntter to the following:		
Xavier Perez			
	(Name of Contact Perso	n)	
	(Firm/ Company)		
5030 5th Avenue #71			
	(Address)		
Key West, Fl. 33040			
	(City/ State and Zip Coo	le)	
pxavi25@yahoo	.com		
	sed for future annual report	notification)	
For further information concerning this matter, plea-	se call:		
Xavier Perez	_{at (} 305	684-5879	
(Name of Contact Person)		ode & Daytime Telephone Number)	
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of State:	
□ \$35 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		Address	
Amendment Section Division of Corporations	-	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton	n Building	
Tallahassee, FL 32314	2661 F	Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

APPROVED AND FILED

13 DEC 23 PM 3:55

Key West Girls Softball Recreational League, Inc. <u>SECRETARY OF STATE</u> TALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) N10000009737

(Doct	iment Number of Co	orporation (if known)		
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporation		es, this <i>Florida Not For</i>	Profit Corporation a	dopts the following
A. If amending name, enter the new na	me of the corporati	ion:		
n/a				The nev
name must be distinguishable and contain "Company" or "Co." may not be used in		tion" or "incorporated	" or the abbreviation	
B. Enter new principal office address, i (Principal office address MUST BE A ST		n/a)		
C. Enter new mailing address, if applic (Mailing address <u>MAY BE A POST O</u>		n/a		
D. If amending the registered agent and new registered agent and/or the new			enter the name of the	
Name of New Registered Agent:	n/a		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		(Florida street address)		
	n/a		, Florida	
	(City)			Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			the obligations of the	position.
_	Signature of New	Registered Agent, if ch	anging	

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 V Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) 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)

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 exempt organizations under section
501(c)(3) of the Internal Revenue Code, or corresponding section
of any future federal tax 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 assets not disposed of shall be disposed of by a court of
competent jurisdiction in 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.

m i e	()	APPROVED AND	
The date of each amendment date this document was signed	• •	FILED	, if other than the
Effective date <u>if applicable</u> :	(no more th	13 DEC 23 PH 3:55 han 90 days after amendment file date) SECHETARY OF STATE TALL AHASSEE, FLORIDA	_
Adoption of Amendment(s)	(CHECK		
The amendment(s) was/w was/were sufficient for ap	• •	nbers and the number of votes cast for the amendment(s)	
☐ There are no members or adopted by the board of o		te on the amendment(s). The amendment(s) was/were	
Dated 12/	20/13		
Signature	yan v	^	_
have r		man of the board, president or other officer-if directors incorporator – if in the hands of a receiver, trustee, or ry by that fiduciary)	
Xavier	Perez		
	(Typed or printed	name of person signing)	
Preside	ent		
	(Title	of person signing)	