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SECRETARY OF STATE

N-5-17-4

Law Offices of

Eric J. Vasquez

Eric J. Vasquez, Esquire*

900 Sixth Avenue South Suite 201 Naples, Florida 34102-6745

Phone: (239) 430-0999

Fax: (239) 263-7164

Melissa A. Vasquez, Esquire*
Of Counsel

*Also admitted in Massachusetts

May 12, 2011

Ms. Tina Roberts Division of Corporations Post Office 6327 Tallahassee, FL 34314

Re: Naturals Youth Baseball League, Inc.

Ref: N10000011840

Dear Ms. Roberts,

Enclosed please find the Articles of Amendment to Articles of Incorporation of Naturals Youth Baseball League, Inc. revised forms.

If you have any questions please call the office at the above number.

-Sincerely,

Rozie McCort

Legal Secretary for

McCort

Eric J. Vasquez



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

May 9, 2011

ERIC J. VASQUEZ LAW OFFICES OF ERIC J. VASQUEZ 900 6TH AVE S, STE 201 NAPLES, FL 34102

SUBJECT: NATURALS YOUTH BASEBALL LEAGUE, INC.

Ref. Number: N10000011840

We have received your document for NATURALS YOUTH BASEBALL LEAGUE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please show address for PETER LANG.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 711A00011448

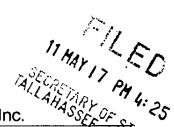
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Naturals Yout	h Base	ball Le	ague, Inc	
DOCUMENT NUM	BER: N10000011840				,
The enclosed Articles	of Amendment and fee are sub	omitted fo	r filing.		
Please return all corre	spondence concerning this mat	ter to the	following	:	
		J. Vasqu			
	(Name of	Contact I	Person)		
	Law Offices	of Eric	J. Vasqu	ıez	
	(Firm	n/ Compar	ıy)		
	900 6th Aven	ue Souti	n, Suite	201	
	(Address)			
<u></u>	Naple	s, FL 34	102		
	(City/ Sta	ite and Zip	Code)		
	mvasquez(
	E-mail address: (to be use		re annuai	героп пошто	ation)
For further information	on concerning this matter, pleas	e can:			
Eric J. Vasquez		at (239	_) 430-099	99
(Name	of Contact Person)		(Area C	Code & Dayti	me Telephone Number)
Enclosed is a check for	or the following amount made p	payable to	the Florid	ia Departmen	at of State:
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certi: (Add	3.75 Filin fied Copy itional coposed)		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallabasses, El. 32314			Amend Divisio Clifton	Address ment Section n of Corporation Building	ons .

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Naturals Youth	n Baseball Lea	ague, Inc. 💛	SSE OF <5
(Name of Corporation as cur	rently filed with th	e Florida Dept. of S	tate) Long
N10	0000011840		10 _A
(Document Nu	mber of Corporation	n (if known)	
rsuant to the provisions of section 617.1006 following amendment(s) to its Articles of I		his <i>Florida Not For</i>	Profit Corporation adop
If amending name, enter the new name	of the corporation:		
e new name must be distinguishable and observation "Corp." or "Inc." "Company"			corporated" or the
Enter new principal office address, if aprincipal office address <u>MUST BE A STRE</u>			
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			·
If amending the registered agent and/or new registered agent and/or the new reg			nter the name of the
Name of New Registered Agent:		· · ·	
New Registered Office Address:	(Florida	a street address)	
			, Florida
		(City)	(Zip Code)
w Registered Agent's Signature, if chang ereby accept the appointment as registere cition.			ept the obligations of t
_	Signature of New R	egistered Agent, if cl	hanging

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>	Type of Action
Pusident	Peter Lang	4051 Sangress Lane	- ☑ Add
	,	Naples, Fr 34112	
Sewtaz	Anthy M. Cialone	5094 POST DAK LI	Add Remove
[vsmr	William William	2978 MONE LISE BY Maples FL 34119	Add Remove
			· ·
	g or adding additional Articles, enter clional sheets, if necessary). (Be specific	· · · · · · · · · · · · · · · · · · ·	
IX. Said org	anization is organized exclusively	for charitable, religious, educ	cational, and
scientific pur	poses, including, for such purpose	es, the making of distributions	s to
organization	s that qualify as exempt organizati	ons under section 501(c)(3)	of the Internal
	de, or corresponding section of an		
-	solution of the organization, assets		or more evernt
•	-		•
	hin the meaning of section 501(c)(
***************************************	ng section of any future federal tax		
government,	or to a state or local government,	for a public purpose. Any su	ich assets not
disposed of s	shall be disposed of by a Court of C	Competent Jurisdiction of the	e county in which
the principal	office of the organization is then lo	ocated, exclusively for such p	ourposes or to
such organiz	ration or organizations, as said Cou	urt shall determine, which are	e organized and
operated exc	clusively for such purposes.		
	· · · · · · · · · · · · · · · · · · ·		
			.

The date of each amendmen	t(s) adoption: April 15, 2011
Éffective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
	the chairman or vice chairman of the board, president or other officer-if directors on the been selected by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Peter Lang
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Page 3 of 3