N11000003012

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/15/11--01010--011 **43.75

Amend

FILED
12 JAN -6 PM 3:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2011

BRUCE M. CODY
NORTH PORT HUSKY'S ATHLETIC ASSOC
4411 MONGITE RD
NORTH PORT, FL 34287

SUBJECT: NORTH PORT HUSKY'S ATHLETIC ASSOCIATION INC
Ref. Number: N11000003012

We have received your document for NORTH PORT HUSKY'S ATHLETIC ASSOCIATION 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):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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: 711A00028005

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NORTH PORT HUSKY'S ATHLETIC ASSOCIATION

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

BRUCE M CODY
(Name of Contact Person)

NORTH PORT HUSKY'S ATHLETIC ASSOCIATION
(Firm/ Company)

4411 MONGITE RD
(Address)

NORTH PORT, FL 34287
(City/ State and Zip Code)

COACHCODY56@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRUCE M CODY at (941) 204-9040
(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

* ALREADY MAIL CHECK *

Articles of Amendment
to
Articles of Incorporation
of

NORTH PORT HUSKY'S ATHLETIC ASSOCIATION INC

(**Name of Corporation as currently filed with the Florida Dept. of State**)

(Document Number of Corporation (if known)

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:

FILED
12 JAN 6 PM 3:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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)

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

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: BRUCE M CODY ALREADY REGISTERED AS AGENT

4411 MONBITE RD.
(Florida street address)

New Registered Office Address:

NORTH PORT, Florida FL 34287
(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.

Bruce M Cody
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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change ___ Add X Remove	V	JENNIFER	
2) ___ Change ___ Add X Remove	T	ELANN GALLIMORE	
3) ___ Change X Add ___ Remove	T	MELISSA CAMERON	3336 AVANTI Circle North Port, FL 34286
4) ___ Change X Add ___ Remove	P	Debbie Ismail	7957 Tropicaire Blvd North Port, FL 34291
5) X Change ___ Add ___ Remove	TR	Bruce M. Cody	4481 Mongite Rd North Port, FL 34287
6) ___ Change X Add ___ Remove	V	LENNY HILLS	4980 City HALL Blvd North Port, FL 34286

E. <u>If amending or adding additional Articles, enter change(s) here</u>:
(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 12-30-11

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 12-30-11

Signature Bruce M Cody

(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)

Bruce M Cody

(Typed or printed name of person signing)

PRESIDENT (TRUSTEE)

(Title of person signing)