

N110000005483

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

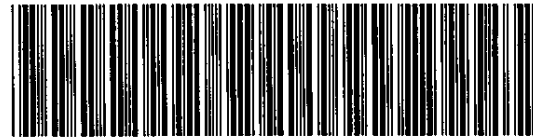
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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FEB 14 2017

R. WHITE

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 20, 2017

REBECCA CAMPBELL
PO BOX 560925
ORLANDO, FL 32856

SUBJECT: BRAVES ROWING, INC.
Ref. Number: N11000005483

We have received your document for BRAVES ROWING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 617A00001287

RECEIVED
JAN 20 2017
10 10 10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Braves Rowing, Inc/DBA Boone Crew

DOCUMENT NUMBER: N11000005483

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

Please return all correspondence concerning this matter to the following:

Rebecca Campbell
Name of Contact Person
Braves Rowing, Inc
Firm/ Company
PO Box 560925
Address
Orlando, FL 32856
City/ State and Zip Code
treasurer@boonerowing.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca Campbell at (321) 2017210
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

17 FEB 19 PM 12:23

Braves Rowing, Inc

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

N11000005483

(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:

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: Lisa Renaud

4547 Flagg Street, Orlando, FL 32812

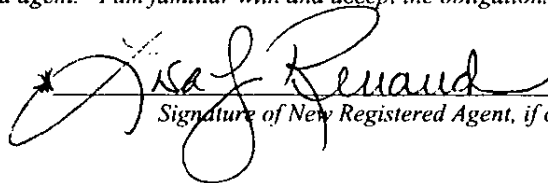
(Florida street address)

New Registered Office Address:

_____, Florida
(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.



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) <u> </u> Change	<u>Presiden</u>	<u>Frances Camilleri</u>	<u>619 Fieldstream Boulevard</u>
<u> </u> Add			<u>Orlando, FL 32825</u>
<u>X</u> Remove			
2) <u> </u> Change	<u>VP</u>	<u>Thomas Murphy</u>	<u>2461 Stoneview Road</u>
<u> </u> Add			<u>Orlando, FL 32806</u>
<u>X</u> Remove			
3) <u> </u> Change	<u>Treasure</u>	<u>Lisa Calabretta</u>	<u>511 Nadine Street</u>
<u> </u> Add			<u>Orlando, FL 32807</u>
<u>X</u> Remove			
4) <u> </u> Change	<u>S</u>	<u>Tracie Michalski</u>	<u>3252 Wickersham Court</u>
<u> </u> Add			<u>Orlando, FL 32806</u>
<u>X</u> Remove			
5) <u> </u> Change	<u>D</u>	<u>David Villar</u>	<u>11540 Purple Lilac Circle</u>
<u> </u> Add			<u>Orlando, FL 32837</u>
<u>X</u> Remove			
6) <u> </u> Change	<u>P</u>	<u>Lisa Renaud</u>	<u>4547 Flagg Street</u>
<u>X</u> Add			<u>Orlando, FL 32812</u>
<u> </u> Remove			

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

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

Add: V Matt Flynn 3464 Heatherstone Drive Orlando, FL 32812

Add: T Rebecca Campbell 1020 Montcalm Street Orlando, FL 32806

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

January 13, 2017

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

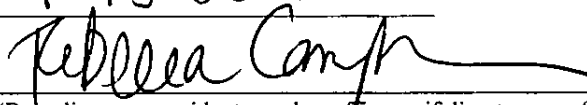
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated

1-13-2017

Signature



(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Rebecca Campbell

(Typed or printed name of person signing)

Treasurer

(Title of person signing)