## NII 000009457

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corporations		
NAME OF CORPORATION: Hemi Spo	orts Kidz	
DOCUMENT NUMBER: N1.1000009	457	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Samuel N Cook		
	(Name of Contact Person	· ·
Hemi Sports Kidz		
	(Firm/ Company)	
2940 nw 20th street	,	
	(Address)	
Ft. Lauderdale, fl 33311		
	(City/ State and Zip Code	<del>)</del>
hemisportskidz@	yahoo.com	
E-mail address: (to be used	for future annual report r	notification)
For further information concerning this matter, please	call:	
Samuel N Cook	,786	531 6041
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
□ \$35 Filing Fee		□\$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	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Hemi Sports Kidz inc	
(Name of Corporation as currently filed with the Florida D	ept, of State)
N11000009457	
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this amendment(s) to its Articles of Incorporation:	Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	•
	The new
name must be distinguishable and contain the word "corporation" of	r "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	age - a
B. Enter new principal office address, if applicable:	4 <del>- 1</del> €20 - 1
(Principal office address MUST BE A STREET ADDRESS)	7
	Ask 2
C. Enter new mailing address, if applicable:	AM D
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	A TO
	*
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address	
At CAL D. San LA .	
Name of New Registered Agent:	
New Registered Office Address: (Florida	street address)
HOW REGISTER CU Office Muli Cass.	•
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v	
	•
Signature of New Registered A	gent, if changing

Page 1 of 4

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	•
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
Change Add Remove	P	Adrian P. Dailey	5612 nw 49th way Tamarac, Fi 33319
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

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the date of each amendment(s) adoption: January 2, 2012				
ffective date if applicable:				
	(no more than 90 days after amendment file date)			
doption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) l.			
There are no members or memb adopted by the board of directo	pers entitled to vote on the amendment(s). The amendment(s) was/were ers.			
Dated 2/13/20	)12 · ·			
have not bee	man or vice chairman of the board, president or other officer-if directors on selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)			
Samuel N	Cook			
	(Typed or printed name of person signing)			
CEO				
<del></del>	(Title of person signing)			