N1100000 11424

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: West Coast Diablos N11000011424 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Leonard M. Padron (Name of Contact Person) West Coast Diablos (Firm/ Company) 11906 Marblehead Dr (Address) Tampa, FL 33626 (City/ State and Zip Code) LEONARD.PADRON@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Leonard Padron (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & **□**\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

(Additional Copy is Enclosed)

Articles of Amendment Articles of Incorporation of

West Coast Diablos 14 MAR 25 PH 12: 24 (Name of Corporation as currently filed with the Florida Dept. of State) N144000044424

N 11000011424		_SeCNETA ₆
(Doc	cument Number of Corporation (if known)	TALLAHASSEE, FLOR
Oursuant to the provisions of section 617. Imendment(s) to its Articles of Incorpora	1006, Florida Statutes, this <i>Florida Not For Pro</i> tion:	fit Corporation adopts the followi
A. If amending name, enter the new na	ame of the corporation:	
Tampa Tomahawks 兀い	٥.	The ne
name must be distinguishable and contain "Company" or "Co." may not be used in	n the word "corporation" or "incorporated" or a the name.	
B. Enter new principal office address, Principal office address MUST BE A S		
	,, 	
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>		
	d/or registered office address in Florida, enter	r the name of the
new registered agent and/or the nev	w registered office address:	
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if cl hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar with and accept the o	bligations of the position.
	Signature of New Paristance Acoust if about	

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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			-
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional s	lding additional Art heets, if necessary).	(Be specific)				
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The late	, if other than the		
date this document was signed. Effective date if applicable:		3/19/2014	
		(no more than 90 days after amendment file date)	
Ada	option of Amendment(s)	(<u>CHECK ONE</u>)	
8	The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated 3/1	9/2014	
	Signature	h Sufell	
	(By the	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Leonar	d M. Padron	
		(Typed or printed name of person signing)	
	Vice Pi	resident	
		(Title of person signing)	

14 MAR 25 PH 12: 24