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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Opportun	ity to Play, I	nc.				
DOCUMENT NUMBER: N1200002	058					
The enclosed Articles of Amendment and fee are subm	nitted for filing.					
Please return all correspondence concerning this matter	r to the following:					
Merritt A. Gardner						
	(Name of Contact Persor	n)				
Gardner Law Firm						
	(Firm/ Company)					
5415 Mariner Street, Sui	te 200					
	(Address)					
Tampa, Florida 33609						
· · · · · · · · · · · · · · · · · · ·	(City/ State and Zip Cod	e)				
E-mail address: (to be used	for future annual report	notification)				
For further information concerning this matter, please	call:					
Merritt A. Gardner	₃₁ ,813	288-9600 Dide & Daytime Telephone Number)				
(Name of Contact Person)	(Area Co	ode & 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 & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)				
Mailing Address Amendment Section	Ameno	Address Iment Section				
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Clifton	on of Corporations Building Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED 2015 MAR 23 PM 4: 51

Opportunity to Play, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N12000002058 (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: 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: (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.

Page 1 of 4

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	PT John E V Mike J SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	DTS	Tarra L. Mitchell	4939 New Providence Avenue
X Remove			Tampa, Florida 33629
2) Change	DT	James E. Mitchell	4939 New Providence Avenue
XAdd	,		Tampa, Florida 33629
Remove 3) Change	DS	Reid L. Mitchell	4939 New Providence Avenue
X Add			Tampa, Florida 33629
Remove 4) Change	DV	Mark S. Mitchell	4939 New Providence Avenue
X Add			Tampa, Florida 33629
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		Page 2 of 4	

amending or adding a ttach additional sheets,	if necessary).	(Be specific)				
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	this document was signed.	Aton:	, if other than the
Eff	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	-
4 d c	ption of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)	
	There are no members or members adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were	
	Dated 63-/8	15 1	
	Signature	HA+1A1	_
	(By the ethical have not been s	of the chairman of the board, president or other officer-if directors referred, by an incorporator — if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	_
	George L. M	litchell	
	(T)	yped or printed name of person signing)	
	President		
		(Title of person signing)	