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TU:	Amendment Section
	Division of Corporations

NAME OF CORPORATION	Team Jama, Inc.			
	N12000002099			
DOCUMENT NUMBER:			·	
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matter	r to the following:		
Heather Mann				
	((Name of Contact Po	erson)	
Pink Sirens				
		(Firm/ Company	<i>i</i>)	
740 San Esteban Ave				
		(Address)		
Coral Gables, FL 33146				
		(City/ State and Zip	Code)	
pinksirensports@gmail.com	i			
	-mail address: (to be used	for future annual rep	ort notification	1)
For further information conc	erning this matter, please o	call:		
Heather Mann		at	(305)	778-6370
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida I	Department of	State:
☐ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif s Certif (Addi	O Filing Fee icate of Status ied Copy tional Copy is

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

Team Jama, Inc.			
(Name of Corporation	as curren	tly filed with t	he Florida Dept. of State)
N12000002099			
(Docur	nent Numb	er of Corporation	on (if known)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida</i> .	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the	e corporati	on:	
Pink Sirens, Inc.			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incor	
B. Enter new principal office address, if applica	ble:	740 San Esteban Ave	
(Principal office addr e ss <u>MUST BE A STREET A</u>		Coral Gables, FL 33146	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		740 San Esteban Ave	
	•	Coral Gables,	FL 33146
D. If amending the registered agent and/or regi	stered offic	æ address in F	lorida, enter the name of the
new registered agent and/or the new register	ed office a	<u>ddress:</u>	
Name of New Registered Agent:	Heather N	lann	
	740 San Esteban Ave		
N D : 100 AU	(Florida street address)		(Florida street address)
New Registered Office Address:	Coral Gal	.1	22146
	Corai Gar		, Florida 33146
		(City)	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen			accept the obligations of the position.
-	Aled.	Mero .	Mari
	' / Si	gnature 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)

Remove

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 Y SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP	J. R. Tamayo	6259 Sunset Drive Apt 7H
Add			South Miami, FL 33143
X Remove			***
2) Change	S	Betty Trueba	12905 SW 107 CT
Add			Miami, FL 33176
X Remove			
3) X Change	S	Raul Isern	5960 SW 85 Street
Add			South Miami, FL 33143
Remove			
4) Change	РТ	Heather Mann	740 San Esteban Ave
X Add		_	Coral Gables, FL 33146
Remove			
5) Change	V	Andrea England	1410 Trillo Ave
X Add			Coral Gables, FL 33146

1				
Change	D	Duffy Danish		807 Devon Place
X Add	-,			Alexandria, VA 22314
Remove				
Remove		P	age 2 of 4	
• •				
. If amending or ad	ding additional	Articles, enter change(s	<u>) here</u> :	
(attach additional s	heets, if necessar	ry). (Be specific)		
				# #
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The date of each amendment(s) adoption	01/01/2016	, if other than the
date this document was signed.		_, 11 00161 01611 016
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doc document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not ent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	
There are no members or members en adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
Dated 01/12/2016		
Signature	٠	_
have not been sele	r vice chairman of the board, president or other officer-if directors octed, by an incorporator – if in the hands of a receiver, trustee, or sted fiduciary by that fiduciary)	
Raul Isern		
-	(Typed or printed name of person signing)	
Secretary		
	(Title of person signing)	