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(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	: #)
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(Do	ocument Number)	
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R. Writt



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Gaines Ville Battlers Education + Jouth Sports Organization
DOCUMENT NUMBER: N1200003296
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Reginal Mosley (Name of Contact Person)
Gaine (ville Rattlers Education + Youth Sports Organization (Firm/Company)
3040 S.E ZIST Ave. (Address)
Gainseville Fl, 32641 (City/ State and Zip Code)
Gainsualle Ratters @ amail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Registed Mosley at 352 870-3179 (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:
■\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

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

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

Articles of Amendment

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Articles	of 16 DEC 53 Valle to
	cation + Jou th Sports Organization
N120	0000739
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion: The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	3040 S.F. 21st Ave.
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Gainesville Fl. 32641
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	3040 S.E. 21st. Are.
	Gainesville F1, 32641
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent: Rea	inald Mosley
	3040 SE. 215+ Ave, (Florida street address)
New Registered Office Address:	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fai	miliar with and accept the obligations of the position.
\mathcal{H}	Zyl M
. S	ignature 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	V Mik	n Doe te Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>T</u>	Brown, Fernetta	1901 NEISTERR Gainesville, Fl 32609
2) Change Add	<u>P</u>	Reggie Musley	3040 SE 215 Ave Gainewille, F1
 ✓ Remove 3) Change ✓ Add Remove 	<u>b</u>	Reginald Mosley	32641 3040 S.E ZISTAUR Gainesville, Fl 3264)
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessa	ry). (Be spec	r change(s) he ific)				
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	other than th
date this document was signed.	
Effective date <u>if applicable</u> :	
(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 lis document's effective date on the Department of State's records.	ted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated	
Signature (By the chairman or vice chairman of the board, president or other officer-if directors	
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Presiden +	
(Title of person signing)	