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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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ZHIZ MAY 18 PM 2: 30
SECRETARY OF STATE
ALLAHASSEE, FIORINA

Amend

MAY 2 2 2012 T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SOUTH FE	OLIDA FASTPI	TCH ASSOCIATION INC
NAME OF CORPORATION: SOUTH FO	003834	
The enclosed Articles of Amendment and fee are sub		
Please return all correspondence concerning this mat	ter to the following:	
KELLY O'HALLE	vear)	
•	(Name of Contact Perso	n)
	(Firm/ Company)	
3100 SW 23 57	PET	
	(Address)	
FORT LAUNDENDAG	City/ State and Zip Cod	3312
E-mail address: (to be use	ran 10 com d for future annual report	PCOSTINET notification)
For further information concerning this matter, please	e call:	en e
KELLY D'HALLORAN	at (754	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	(Area C ayable to the Florida Depa	•
\$35 Filing Fee \$35 Status		□\$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	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle
4	Tallaha	assee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles	of Incorporation
SOUTH FLORING FAS	TPITCH ASSOCIATION INC.
(Name of Corporation as currently filed with the Flor	
11/200000 383	
(Document Number of Corpora	ution (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
NA	The new
name must be distinguishable and contain the word "corporat "Company" or "Co," may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A SSET
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	
Name of New Registered Agent:	1
New Registered Office Address:	Florida street address)
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	Agent: niliar with and accept the obligations of the position.
Signature of New Registe	ered Agent, 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 <math>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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add Remove	P	ANDREA EVA RAYMOND	9465 SW 53 STREET COOPER CITY, PL 33328
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove		_	

. If amending or adding additional Articatach additional sheets, if necessary).	cles, enter cl (Be specific	nange(s) here	:		
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	The date of each amendment(s) adoption: 5/16/12
	Effective date if applicable: 5/16/12
	(no more than 90 days after amendment file date)
	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.
	Dated5/16/12
	Signature Selly Clif
	(By the 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)
	(Title of person signing)