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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	TREASURE COAS' ON:	T YOUTH FOOT	BALL AND (CHEERING ASSOCIATION, INC.
DOCUMENT NUMBER: _	N13000000152			
The enclosed Articles of Am	endment and fee are sub	mitted for filing.		
Please return all corresponde	nce concerning this matte	er to the following	;	
VINCE W PETERSON				
		(Name of Contac	Person)	
		(Firm/ Comp	any)	
10380 SW VILLAGE CENT	TER DRIVE UNIT # 131			
		(Address)	
PORT ST. LUCIE, FL 3498	7			
		(City/ State and Z	ip Code)	
E	-mail address: (to be used	I for future annual	report notific	ation)
or further information conc	erning this matter, please	call:		
VINCE W PETERSON			772 at	834-7617
((Name of Contact Person)	(Area Co	de) (Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pa	ayable to the Flori	da Departmen	t of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copenclosed)	c by is C (/	52.50 Filing Fee ertificate of Status ertified Copy Additional Copy is inclosed)
<u>Mailing A</u> Amendme			Street Addre	
	Cornorations		Division of C	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

TREASURE COAST YOUTH FOOTBALL AND CHEERING ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
N13000000152		
(Document Numb	er of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated	I" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	2016 SE SA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		22 3
(maining dauress MAT BE A COST OF TIGE DON)		
		2: 5
		<u> </u>
D. If amending the registered agent and/or registered office	ce address in Florida	, enter the name of the
new registered agent and/or the new registered office a	ddress:	
Name of New Registered Agent:		
Along Description of Office Address	(F	lorida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent. I am fa	miliar with and accept	the obligations of the position.
S	onature of New Revisi	ered 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 Mil	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change Add	Р	KEITH ENGLER	10380 SW VILLAGE CENTER DF UNIT # 131
 X Remove 2) Change Add 	<u>s</u>	BECKFORD MANDI	PORT ST. LUCIE, FL 34987 10380 SW VILLAGE CENTER DF UNIT # 131
X Remove 3) Change Add X Remove	<u>T</u>	DAWN ENGLER	PORT ST. LUCIE, FL 34987 10380 SW VILLAGE CENTER DE UNIT # 131 PORT ST. LUCIE, FL 34987
4) Change Add	<u>p</u>	VINCE W PETERSON	10380 SW VILLAGE CENTER DF UNIT # 131
Remove 5j Change X Add	<u>T</u>	CARSON J PETERSON	PORT ST. LUCIE, FL 34987 10380 SW VILLAGE CENTER DF UNIT # 131
Remove 6) Change Add			PORT ST. LUCIE, FL 34987
		Page 2 of 4 <u>Articles, enter change(s) here</u> : y). (Be specific)	
		1.249	

	
	
	
Page 3 of 4	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: (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 b document's effective date on the Department of State's records.	e listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	

	•	•	
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Й	There ar	e no me	mbers or
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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	Dec. 20, 2019	
Signature	Vin.	

(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)
RESIDENT	