Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : CORP USA

Account Number: 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

NOV 13 2015

I ALBRITTON

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:				
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COR AMND/RESTATE/CORRECT OR O/D RESIGN

MUTINY BASEBALL CLUB INC.

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Electronic Filing Menu

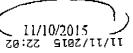
Corporate Filing Menu

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https://efile.sunbiz.org/scripts/efilcovr.exe

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November 12, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MUTINY BASEBALL CLUB INC. 5801 NW 151 ST, STE 305 MIAMI LAKES, FL 33014

SUBJECT: MUTINY BASEBALL CLUB INC.

REF: N13000001003

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

The corporate name has (INC.) as the suffix.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II FAX Aud. #: E15000266378 Letter Number: 115A00023852

15 KOV 12 PM 3: 4,5

P.O BOX 6327 - Tallehassee, Florida 32314

COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION:	Mutin	y Baseball	Clb Inc
DOCUMENT NUMBER:	NI3	000001	oc3 .
The enclosed Articles of Amenda	ant and fee are subt	nitted for filing.	
Please remm all correspondence o	oncerving this matte	er to the following:	
	E de	Name of Contact Pers	0
		•	-
(Alfaro P	Fernan	idez QA
		(Firm/ Company)	
		(Address)	
	Miami L	-akes	FI 33014
)aw@	(City/State and Zip.Co	F1 33014 nandez-com
E-mail	address: (to be used	for foture annual repor	notification)
For further information concerning	this matter, please o	all:	_
berl	- Allaro	at	(305) 801 7970 Area Code) Daytime Telephone Number)
(Name	of Contact Person)	(1	rea Code) Daytime Telephone Number)
Enclosed is a check for the following	og amount made pay	while to the Florida Dep	partment of State:
□ \$35 Filing Fee □\$4 Ce	3.75 Filing Fee & (nificate of States	343.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Finctored)
Mailing Address Amendment Sect Division of Corpo P.O. Box 6327 Tallahassee, FL 3	ion Orations	Ameni Divisi Cliffor 2661 i	Address dinent Section on of Corporations Building Executive Center Circle

		FI
		2015 NOV 10 AN
	s of Amendment to	SEC 101/0 A
Articles	of Incorporation	ALL SETAN
Mutiny Ba	seball Clu	b INC. SSEPTS
(Name of Cornoration as curren	, ¬	Dept of State)
N/13000		
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:		fle Corporation adopts the following
A. If amending name, enter the new name of the corporati	<u>on:</u>	
		The now
name news he distinguishable and contain the word "corporat" "Company" or "Co," may not be used in the name.	ion" or "incorporated" or	the abbreviation "Cosp." or "Inc."
Company or Co. may not be used in the name.		
B. Enter new principal office address, if applicable: (Principal office address MUST BB A STREET ADDRESS)	***************************************	7
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered affice a		r the game of the
Name of New Registered Agent:		
	(Florida :	tirvet address)
New Registered Office Address:		
· · · · · · · · · · · · · · · · · · ·		Florida
·	(Clty)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Avents nitiar with and accept the o	bligations of the position.
CV.	gnature of New Registered	Anune (Cabagrapa
Δi,		reen, o coursing

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 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, Salty 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 Rennove X Add	PT John D Y Mike I SV Salv S	ones	
Type of Action (Check One)	<u>Title</u>	Namo	Address
1) Change	<u>D</u>	Emma Fernandez	J801 NW ISI Sheet Sle Mignillater F1 330,3e1
Add Remove	,		•••
2) Change	Perident	Yudellay's ternando	Miami Laker F1 32Ty
Remove 3) Change	Fresident	11.	5801 NW 151 Story #130
Add		}	Mami Laker Fl 336H
4)Change			
Remove			
5) Change			
Remove			
6) Change Add	·		
Remove		Page 2 of 4	

. If minending or adding a (much additional sheets,	if necessary). (Be spe	cific)			
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		TA	- <u>-</u>		
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Page 3 of 4

The date of each amendment(s) adoption:it date this document was signed.	f 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 be it document's effective date on the Department of State's records.	sted 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 Nov 10 2015	
Signature	
(By the chairman of 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, countered or other court appointed fiduciary by that fiduciary) (Typed or printed name of parson signing)	
President	

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