N13000001916

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FAREPLAY, INC.
DOCUMENT NUMBER: N 1300001916
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
WILLIAM E. BUCKLEY JR. (Name of Contact Person)
FAREPLAY, NC.
410 EVERNIA STREET # 11 (Address) 22401
WEST PALM BEACH, FL 35470 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) Name of Contact Person) (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) \$43.75 Filing Fee Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FAE	EPLAY	INC.	
(Name of Corporation as currently filed with the Flo			_
N 130000	1916		
(Document Number of Corpora	ation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i>	Profit Corporation adopts th	e following
A. If amending name, enter the new name of the corporati	<u>ion:</u>		
name must be distinguishable and contain the word "corporate	tion" or "incorporated"	or the abbreviation "Corn"	The new
"Company" or "Co." may not be used in the name.	non or incorporated	or incustration Corp.	(** **********************************
B. Enter new principal office address, if applicable:			_ 73
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	•		HAAA
C. Enter new mailing address, if applicable:		; ;	. NO
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			÷ 5

			_
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		nter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)		
		, Florida	
(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair	Agent: miliar with and accept to	he obligations of the position	
			
Signature of New Regis	tered 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 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		<u>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
Change Add Remove	7	WILLIAM E. BUCKLEY J	WEST PALM BEACH FLORIDA, 33401
2) Change Add			
Remove 3) Change			
Add			
4) Change			
Remove			
5) Change Add	 		
Remove			
6) Change			
Remove		_	

f amending or adding additional Arti Mach additional sheets, if necessary).	(Be specific)
 	

The date of each amendment(s) adoption: 3-1-2613		
Effe	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Ado	option 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 3-1-2013	
	Signature WM & Brulley W	
	(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)	
	PRESIDENT	
	(Title of person signing)	