# N1300006613

| (Re                                     | questor's Name)    |             |  |  |  |  |
|---|--------------------|-------------|--|--|--|--|
| (Address)                               |                    |             |  |  |  |  |
| (Address)                               |                    |             |  |  |  |  |
| (City/State/Zip/Phone #)                |                    |             |  |  |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL        |  |  |  |  |
| (Bu                                     | isiness Entity Nai | me)         |  |  |  |  |
| (Document Number)                       |                    |             |  |  |  |  |
| Certified Copies                        | _ Certificate      | s of Status |  |  |  |  |
| Special Instructions to Filing Officer: |                    |             |  |  |  |  |
|   |                    |             |  |  |  |  |
|   |                    |             |  |  |  |  |
|   |                    |             |  |  |  |  |

Office Use Only



400264157904

09/15/14--01030--023 \*\*35.00

SECRETARY OF STAFE

1-1-00:3-14



TO: Amendment Section Division of Corporations NAME OF CORPORATION: FORT WAHON BEACH JUNIOR VIKINGS, TAKE 3000006613 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FORT WAHON BEACH JUNIOR VIKINGS, I FT. WAHON BCh. FL. 32548
(City/State and Zip Code) Finleykg@ Yalloo, Com
Final address: (to be used for future annual report notification) For further information concerning this matter, please call:

at (850) 855-9774 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

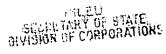
#### Mailing Address

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

#### Street Address

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

### Articles of Amendment to Articles of Incorporation of



14 SEP 15 PH 4: 01

| (Name of Corporation as currently filed with the Florida Dept. of State)   |
|--|
| FORTWAHON BEACH JUNIOR VIKINGS, INC NIBOCCOGLOIS   |
| (Document Number of Corporation (if known)   |
|  |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
|  |
| A. If amending name, enter the new name of the corporation:  |
| OKALOOSA YOUTH SPORTS LEAGUE, TNC.  The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."                  |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."  |
| "Company" or "Co." may not be used in the name.  |
| B. Enter new principal office address, if applicable:  |
| (Principal office address MUST BE A STREET ADDRESS)  |
|  |
| *** *** *** *** *** *** *** *** *** **   |
| C. Enter new mailing address, if applicable:   |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> )   |
|  |
|  |
|  |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the   |
| new registered agent and/or the new registered office address:   |
| Name of New Registered Agent:  |
|  |
| (Florida street address)   |
| New Registered Office Address:   |
| , Florida  |
| (City) (Zip Code)  |
| New Registered Agent's Signature, if changing Registered Agent:  |
| I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.  |
|  |
| Signature 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 | <u>PT</u><br><u>V</u><br><u>SV</u> | John Do<br>Mike Jon<br>Sally Sm | <u>nes</u> |         |
|----------------------------------|------------------------------------|---------------------------------|------------|---------|
| Type of Action<br>(Check One)    | <u>Title</u>                       |                                 | Name       | Address |
| 1) Change                        |                                    | _                               |            |         |
| Add                              |                                    |                                 |            |         |
| 2) Change                        |                                    | <del></del>                     |            |         |
| Add                              |                                    |                                 |            |         |
| 3) Change                        |                                    | _                               |            |         |
| Add Remove                       |                                    |                                 |            |         |
| 4) Change                        |                                    |                                 |            |         |
| Add                              |                                    | _                               |            |         |
| Remove                           |                                    |                                 |            |         |
| 5) Change Add                    | <del> </del>                       | <del></del>                     |            |         |
| Remove                           |                                    |                                 |            |         |
| 6) Change                        | -                                  | _                               |            |         |
| Add                              |                                    |                                 |            |         |
| Remove                           |                                    |                                 |            |         |

| attach additional sheets, if necessary). | (Be specific) |              |
|--|---------------|--------------|
|  |               |              |
| ·····                                    |               |              |
|  |               |              |
|  |               | ·            |
|  |               |              |
|  | •             |              |
| <del></del>                              |               |              |
|  |               | <del></del>  |
|  |               | ····         |
|  |               |              |
|  |               |              |
|  |               |              |
|  |               |              |
|  |               | <del> </del> |
|  |               |              |
|  |               |              |
|  |               |              |
|  |               |              |
|  |               |              |
|  |               | <del> </del> |
|  |               |              |
|  |               |              |
|  | ·····         | <del></del>  |
|  |               |              |
|  |               |              |
|  |               |              |
|  |               |              |
|  |               |              |

| The date of each amendment(s) adoption                                | 1: <u></u>   | EATLEU er   | , if other than the |
|---|--|---|---------------------|
| date this document was signed.  |  | LECKLE THEY OF STATIONS  NIVISION OF CORPORATIONS |                     |
| Effective date <u>if applicable</u> : <u>\$5</u>                      | nomore than 90 days after a                                      | mendmen BEBales PH 4: 02                          | _                   |
| Adoption of Amendment(s)  | (CHECK ONE)  |   |                     |
| ☐ The amendment(s) was/were adopted was/were sufficient for approval. | by the members and the numb                                      | per of votes cast for the amendment(s)            |                     |
| There are no members or members en adopted by the board of directors. | titled to vote on the amendme                                    | nt(s). The amendment(s) was/were                  |                     |
| Dated 5 Sept.   | 2014   |   |                     |
| Signature <u>Kenni</u>  | ett Finler   | 7   |                     |
| (By the chairman of   |  | resident or other officer-if directors            |                     |
|   | cted, by an incorporator – it is ted fiduciary by that fiduciary | the hands of a receiver, trustee, or              |                     |
| KENNET  | H FINLEY   |   |                     |
| (Type   | d or printed name of person si                                   | gning)  |                     |
| PresiD  | ENT  |   |                     |
| •   | (Title of person signing)  |   |                     |