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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Wildcats Softball	Booster Club, Inc.
DOCUMENT NUMBER:	000007878
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Stacey Vayne	
	(Name of Contact Person)
Wildeats Softball Booster Club, Inc.	
	(Firm/ Company)
9371 NW 15 Street	
	(Address)
Plantation, FL 33322	
	(City/ State and Zip Code)
vayne.stacey@gmail.com	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Stacey Vayne	954 336-0381
(Name of Contact Per	son) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	& D\$43.75 Filing Fee & D\$52.50 Filing Fee us Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

· .		es of Amendment to s of Incorporation of	,	2018 OCT 19 19
Wild	lcats Softba	ill Booster Club, Inc	·.	Carried Co
(Name of Corporation	ı as curren	tly filed with the F	lorida Dept. of State	<u>e)</u>
	000	000181	8	
(Docu	ment Numb	er of Corporation (i	f known)	'/2
ursuant to the provisions of section 617.1006, Flomendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida Not</i>	For Profit Corporati	ion adopts the following
. If amending name, enter the new name of the	e corporati	ion:		
∜/A				The new
ame must be distinguishable and contain the word		tion" or "incorpore	ated" or the abbrevia	tion "Corp." or "Inc."
Company" or "Co." may not be used in the nam	<u>¢</u> .	9371 NW 15 Stree	rt	
. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>				
. Enter new mailing address, if applicable:		9371 NW 15 Stre		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE	BOX)			
		Plantation, FL 33.	322 	
). If amending the registered agent and/or regi	stared offi	an address in Flori	do antar the name	of the
new registered agent and/or the new register			da, enter the hante t	<del>// (iic</del>
Name of New Registered Agent:	Stacey Va	ayne		
	9371 NW	/ 15 Street		
		····································	(Florida street address)	
New Registered Office Address:				21222
	Plantation			orida
		(City)		(Zip Code)
ew Registered Agent's Signature, if changing	Registered	Agent:		A.1
hereby accept the appointment as registered ager	nt. I am fa.	miliar with and acc	ept the obligations of	tne position.
	<		۵	
-	<u> </u>	ignature of New Re	rgistered Agent, if cha	ınging
	J		G	c. o

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>V</u> <u>Mi</u>	nn Doe ke Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) X Change	P	Lorrie Solo	12041 NW 35th Street
Add			Sunrise, FL 33325
Remove			
2) Change	TR	Kim Stevenson	770 Cumberland Terrace
Add			Davie, FL 33325
X Remove			
3) Change	TR	Don Oleski	10790 Cameron Court, Apt. 207
X Add			Davie, FL 33324
Remove			
4) Change	ATR	Tina Genoway	3618 Citrus Trace #6
Add			Davie, FL 33328
X Remove			
5) Change	S	Cristina Gaskill	12615 SW 34 Place
Add			Davie, FL 33330
X Remove			
6) Change	S	Stacey Vayne	9371 NW 15 Street
x Add			Plantation, FL 33322
Remove			

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> <u>V</u> <u>SV</u>	John Doc Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Danielle Pappas	12020 NW 4 Street
Add			Plantation, FL 33325
X Remove			<del></del>
2) Change	VP	Gabi Rosenthal	401 Tamarind Drive
XAdd			Hallandale Beach 33009
Remove			
3 ) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		P <del>age 2 of </del> ◆	

extra page

(attach additio	nal sheets, if nece	essary). (Be s	pecific)				
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	8/30/2018	
The date of each amenda	ment(s) adoption:	, if other than the
date this document was sig	gned.	
	9/1/2018	
Effective date if applical		-
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.	e listed as the
Adoption of Amendment	t(s) ( <u>CHECK ONE</u> )	
The amendment(s) w was/were sufficient for	ras/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no member adopted by the board	rs or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.	
Dated _ Signature _	10-17-2018	
(B	y the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or ther court appointed fiduciary by that fiduciary)	
	Stacey Vayne	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	