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| (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | |
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Office Use Only



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Amend CC

AUG 25 2017 I ALBRITTON TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION | :EVOL | NOITU | FASTBITE | THS | RAVELBALL INC |
|--|--|---|----------------|--------------------|--|
| DOCUMENT NUMBER: | NI3 | 30000 | 3873 | - | |
| The enclosed Articles of Amen | dment and fee are subm | nitted for fili | ng. | | |
| Please return all correspondence | e concerning this matte | er to the follo | wing: | | |
| | SHER | | ITTLE | | |
| | | (Name of Co | ntact Person) | | |
| | EVOLUT | | ST PLICH | TR | AVELBALL INC |
| 1 | 426 FLO | • | _ | | |
| | | | lress) | | |
| | ROCKLED | GE, FL | 329 | 55 | • |
| | | | | | |
| | stuttler still address: (to be used | 1400 | jmail.c | 0m | |
| | | | ñual report no | tification | |
| For further information concern | ing this matter, please | call: | | | |
| SHERRY | TTTLE nme of Contact Person) | | at32 | 21 | 5765852 |
| (½) | nme of Contact Person) |) | (Area | Code) | (Daytime Telephone Number) |
| Enclosed is a check for the follo | owing amount made pay | yable to the F | lorida Departi | ment of S | State: |
| □ \$35 Filing Fee □ | 3\$43.75 Filing Fee & 1 Certificate of Status | ☑\$43.75 Fili Certified C (Additiona enclosed) | ору | Certifi Certifi |) Filing Fee cate of Status ed Copy ional Copy is sed) |
| Mailing Add | | | Street Ac | | |
| Amendment Section Division of Corporations | | Amendment Section Division of Corporations | | | |
| P.O. Box 6327 | | Clifton Building | | | |

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

| | of |
|---|---|
| EVOLUTION F | ASTPITCH TRAVELBALL INC |
| | ly filed with the Florida Dept. of State) |
| N130000 | 7873 |
| (Document Number | er of Corporation (if known) |
| Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation: | s, this Florida Not For Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporation | on: |
| | The new |
| name must be distinguishable and contain the word "corporati <u>"Company" or "Co," may not be use</u> d in the name. | ion" or "incorporated" or the abbreviation "Corp," or "Inc." |
| B. Enter new principal office address, if applicable: | 1426 FLOYD DRIVE |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | ROCKLEDGE FL 32955 |
| | SHERRY TUTTLE |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | SAME AS ABOVE |
| | 7. S. 22. |
| | |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac | |
| Name of New Registered Agent: | SHERRY TUTTLE |
| | 1426 PLOYD DRIVE CO |
| New Registered Office Address: | ٨ |
| | KOCKLEDGE Florida 32955 (City) (Zip Code) |
| New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam. | Agent: niliar with and accept the obligations of the position. |
| | Joan |
| Sig | gnature 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>Doe</u> <u>Jones</u> <u>Smith</u> | |
|-----------------------------------|--------------|--|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | VP | WALTER KRESSLER | 2100 BRIDLE PATH MELBOURNE FL 32935 |
| 2) Change Add | T | KIM KRESSLER | 2100 BRIDLE PATH MELBOURE FL 32935 |
| Remove 3) Change Add | <u> </u> | SHERRY TUTTLE | 1426 FLOYD DRIVE ROCKLEDGE FL 32955 |
| ## Remove Remove Add Remove | <u>S</u> | CRYSTAL HOFFMAN | 2227 DARTMOUTH DRIVE COCOA, FL 32926 |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | | |

| ttach additional sheets, if necessary). | (Be specific) |
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| The date of each ame date this document wa | ndment(s) adoption: 8/17/17 s signed. | , if other than the |
| Effective date <u>if appl</u> | (no more than 70 days after amendment file date) | |
| | (no more than yo auts after amenament file date) | |
| Note: If the date inser document's effective d | ted in this block does not meet the applicable statutory filing requirements, this date will not ate on the Department of State's records. | be listed as the |
| Adoption of Amendm | ent(s) (<u>CHECK ONE</u>) | |
| The amendment(s was/were sufficie | s) was/were adopted by the members and the number of votes cast for the amendment(s) nt for approval. | |
| There are no men adopted by the bo | nbers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors. | |
| Dated | 8/17/17 | |
| Signature | | |
| | (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) | _ |
| | MICHAEL SOLIVEN | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |