N13000011033

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TO: Amendment Section Division of Corporations

is the second second			
NAME OF CORPORATION: Shotokan Karate	Center, Inc.		
DOCUMENT NUMBER: N13000011033			
The enclosed Articles of Amendment and fee are s			
Please return all correspondence concerning this ir	_		
Jeffrey Lynne, Esq.		-	
Jeffrey Lynne, 128q.			
	(Name of Cont	act Person)	
Beighley, Myrick, Udell & Lynne, P.A.			
	(Firm/ Cor	npany)	
2385 Executive Center Drive, Suite 250			
	(Addre	88)	
Boca Raton, Florida 33431			
	(City/ State and	l Zip Code)	
JLynne@bmulaw.com			,
E-mail address: (to be t	ased for future annu	al report notificatio	n)
For further information concerning this matter, ple	ase call:		
Jeffrey Lynne, Esquire		(561) at	549-9036
(Name of Contact Per			(Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Flo	rida Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat		oy Certi copy is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Sect Division of Corp	orations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Shotokun Karate Center, Inc.		
(Name of Corporation	i as currently filed with the Florida	(Dept. of State)
N13000011033		
(Docu	ment Number of Corporation (if knov	vn)
Pursuant to the provisions of section 617,4006, Flormendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For P	Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
name must be distinguishable and contain the word	d "corporation" or "incorporated" i	The new or the abbreviation "Corp!" or "Inc."
"Company" or "Co." may not be used in the nam	<u>e</u> .	
B. Enter new principal office address, if applica	able	1990年 -
Principal office address MUST BE A STREET		8 8
		<u></u>
Enter new mailing address, if applicable:	POS.	5
(Mailing address MAY BE A POST OFFICE	<u> </u>	
). If amending the registered agent and/or regi		ter the name of the
new registered agent and/or the new register	red office address:	
Name of New Registered Agent:		
	2385 Executive Center Drive, Suite	250
		la street address)
New Registered Office Address		
	Boca Raton	, Florida
	(City)	(Zip Code)
	•	
New Registered Agent's Signature, if changing		
I hereby accept the appointment as registered ager	nt. I am familiar with and accept the	? orugations of the position.
-	69 69 69	
	Signature of New Registers	id Agent itribunging

If amending the Officers and/or Directors, enter the fitle 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	\underline{V} \underline{M}	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	D	Jeffrey Lynne	2385 Executive Center Drive
Add			Suite 250
Remove			Boca Raton, Florida 33431
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

<mark>If amending or adding</mark> attach additional sheets	, if necessary).	(Be specific)				
•		<u>-</u>				
		.				
						
			_		 	
	-				 	
	 -				 _ 	

	date of each amendment	s) adoption:	, if other than the
date	this document was signed		
L cc.	ective date if applicable:	June 20, 2017	
17136	etive date <u>ir appricanie</u> .	tno more than 90 days after amendment file dat	16)
		is block does not meet the applicable statutory filing require the Department of State's records.	ments, this date will not be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast to proval.	or the amendment(s)
Z	There are no members or adopted by the board of	members entitled to vote on the amendmem(s). The amendr irectors.	ment(s) was/were
	Dated <u>(</u>	20/2017	
		chairman or vice chairman of the board, president or other of been selected, by an incorporator – if in the hands of a rea	
		ourt appointed fiduciary by that fiduciary)	
		Jethrey Lynne Typed or printed name of person signif	
		☐yped of printed name of person signif	ng)
		Director and Rogister	ed Agent
		(Title of person signing)	