N14000000258

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14 FEB 10 PM 1:28
SECRETARY OF STATE
OF STATE

C. LEWIS
FEB 1 2 2014
EXAMINER

COVER LETTER

TO: Amendment Section ' Division of Corporations

,					
Name of Corporation: North Tampa Youth Sports, Inc					
DOCUMENT NUMBER: N1400000	258				
The enclosed Articles of Amendment and fee are sub-					
Please return all correspondence concerning this matte	er to the following:				
Kirk Sweet					
	(Name of Contact Pers	on)			
North Tampa Youth Spo	rts, Inc				
	(Firm/ Company)				
6800 North Rome Avenu	ıe				
	(Address)				
Tampa, FL 33605					
	(City/ State and Zip Co	de)			
northtampabaseball2014@gmail.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Kirk Sweet	_{at (} 813	_ _, 810-5057			
(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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amer Divis Clifto	t Address adment Section ion of Corporations on Building Executive Center Circle			

Tallahassee, FL 32301

APPROVED
/ ND
F ED

Articles of Amendment to Articles of Incorporation

14 FEB 10 PM 1: 28

SECRETARY OF STATE

North Tampa Youth Sports Inc

North rampa routh oports inc	\mathcal{W}^{*}
(Name of Corporation as currently filed with the Florida Dept. of	State)
N1400000258	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida</i> numerates are its Articles of Incorporation:	a Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
	The nev
name must be distinguishable and contain the word "corporation" or "inco "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 MAY BE A POST OFFICE BOX)	
/	
/	
D. If amending the registered agent and/or registered office address in	Florida autoutho name of the
new registered agent and/or the new registered office address:	Florida, enter the name of the
Name of New Registered Agent:	
(Florida street a	ddress)
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 ar	nd accept the obligations of the position.
Signature of New Registered As	gent, if changing
/ Ligitime by the magnetic out in	, , , , , , , , , , , , , , , , , , ,

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>V</u> <u>Mik</u>	n <u>Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PD	Kirk Sweet	6800 North Rome Ave
Add			Tampa, FL 33605
Remove			
2) Change			
Add			
X Remove	575		
3) Change	PTD	Charles W. Kirkland	6800 North Rome Ave
Add			Tampa, FL 33605
Remove			
4) Change	TD	Tina M King	6800 North Rome Ave
X Add			Tampa, FL 33605
Remove	•		
5) Change			
Add	•		· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add			
Remove	•		

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)				
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<u>. </u>			······································		

APPROVEL / ND F ED

The	date of each amendment(s) ac	loption:		, if other than the
date	this document was signed.		14 FEB 10 PM 1: 28	r
Effe	ective date <u>if applicable</u> :		among spy of STATE	
		(no more than 90 days afi	ter amendment file date) 1911) A	
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/were ac was/were sufficient for approve		umber of votes cast for the amendment(s)	
	There are no members or members adopted by the board of director		dment(s). The amendment(s) was/were	
	Dated 2/6/20	10	<u> </u>	
	Signature	1		
		man or vice chairman of the boa	rd, president or other officer-if directors	
	have not be		if in the hands of a receiver, trustee, or	
	Timo	m. Kina		
		(Typed or printed name of person	on signing)	
	Treas	wer		
		(Title of person signi	ng)	