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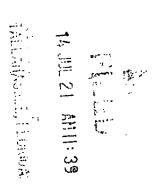
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AUG 0 5 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations Street Warriors of Central Fl., Inc. N14000001112 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: bert Blansfield Warriors of Central Florida
(Firm/Company) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy

Mailing Address

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

(Additional copy is

enclosed)

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

Certified Copy

(Additional Copy is Enclosed)

	Articles of Amendment	and and
	Articles of Incorporation	14 JUL 21 AH II: 39
Stant Live	of	14 JUL 21 AMII: 39
JIFECT War	riors of Centr	al Florida Inc.
(Name of Corporation as currently filed w	OOO 1117	archalledonn, i Lunda
(Document Nu	mber of Corporation (if known)	
	•	
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not For Pi</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	l "corporation" or "incorporated" o 2.	r the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>		
	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	PO BOV 3	87
(Maning usuress <u>MM1 122 / 1 / 051 / 01 / 102 / </u>		0 El 22029
	Eagle Lar	e, FF 33057
D. If amending the registered agent and/or regis		er the name of the
new registered agent and/or the new register	ed omice aggress;	
Name of New Registered Agent:		
		
New Registered Office Address:	(Florida street address)	
•		Florido
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing R	Pagistared Agants	,
I hereby accept the appointment as registered agen		obligations of the position.
Signatu	re of New Registered Agent, if change	ring

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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	ED	Adam Smith	5 West Lake Hamilton Cit Winter Haven, FL 33881
Remove 2) Change Add	ED	Melissa Sanvolo	3345 Timberline Rd. W Winter Haven, FL 33880
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add			
Remove 6) Change Add Remove	<u> </u>		
1,011010			

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)
·	
· -	

i ne date	, if other than th	
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	
Ada	option of Amendment(s) (CHECK ONE)	
ķ	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated	
	Signature Blow Blow W	
	(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)	
	Robert C. Blansfield (Typed or printed name of person signing)	
	Director of Finance	
	(Title of person signing)	