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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: South Flori	da Youth Bas	sketball League, Inc
DOCUMENT NUMBER: N1400003	996	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Jeff Feig		
	(Name of Contact Persor	n)
South Florida Youth Bas	ketball Lea	gue, Inc
	(Firm/ Company)	
P.O. Box 266468		
	(Address)	
Weston, Florida 33326		
	(City/ State and Zip Code	e)
SFLYBBL@aol.co	om	
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Jeff Feig	_{at} 239	776-1316
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	urtment of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□\$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	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation



South Florida Youth Basketball League, Inc

(Name of Corporation as currently filed with the Florida Dept. of State) N14000003996 (Document Number of Corporation (if known)

ving

Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the follow	
A. If amending name, enter the new name of the corpora	tion:	
	The r	
"Company" or "Co." may not be used in the name.	ntion" or "incorporated" or the abbreviation "Corp." or "Inc	
B. Enter new principal office address, if applicable:	4302 Hollywood Blvd.	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	⁾ #99	
	Hollywood, FI 33021	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1844 Oleander Street	
	Sarasota, Fl 34239	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida	
(City,	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fo	amiliar with and accept the obligations of the position.	
Signature of New	Registered Agent, if changing	

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, an 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 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	VP	James L. Williams III	SUNRISE, FL 33326
 X Remove 2) Change X Add 	<u>VP</u>	Eugene Snell	#99
Remove 3) Change Add			Hollywood, FI 33021
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			

If amending or adding additional Art attach additional sheets, if necessary).	(Be specific)			
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	date of each amendment this document was signed		_, if other than the
	octive date <u>if applicable</u> :	06/18/2014	
	THE CASE IT APPLICANTS	(no more than 90 days after amendment file date)	
Ádo	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were sufficient for an	ere adopted by the members and the number of votes cast for the amendment(s) approval.	
	adopted by the board of		
	Dated U6/	18/2014	
	Signature	J-729_	
	have t	chalman or vice chalman of the board president or other officer-if directors not been selected, by an incorporator—If in the hands of a receiver, trustee, or court appointed fiduciary by that figuralary)	_
	Jeffrey	Feig	
	(Typed or printed name of person signing)		
	Preside	ent	
		(Title of person signing)	