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AUG 2 8 2014 C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: STARS AND S	TRIPES BOOSTER CLUB INC.
DOCUMENT NUMBER: N 14 00 000	5954
The enclosed Articles of Amendment and fee are submitted fo	r filing.
Please return all correspondence concerning this matter to the	following:
AMANDA WIC	365
STARS AND STRIPES	
11075 HEARTH	RD (Addrags)
SPRING HILL	FL 34608
(City/ S	tate and Zip Code)
E-mail address: (to be used for futu	re annual report notification)
For further information concerning this matter, please call:	
AMANDA WIGGS (Name of Contact Person)	at ( 765 ) 507-1178 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	•
□ \$35 Filing Fee □\$43.75 Filing Fee & S43.75 Certificate of Status Certi (Add	·
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



	or _
STARS AND STRIPES	BOOSTER CLUB 14 NIGRECAM 11: 45
(Name of Corporation as currently filed with the	
N14000005954	TALL MARGE CLEONA
	of Corporation (if known)
(Document Number of	a Corporation (it known)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:
FLIP-N-4STARS INC	The new
name must be distinguishable and contain the word "corp	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	,
B. Enter new principal office address, if applicable:	11075 HEARTH RD
(Principal office address MUST BE A STREET ADDRE.	SES) SPRING HILL FL 34608
	Street Trice Table
C. Enter new mailing address, if applicable:	- 1/ A
(Mailing address MAY BE A POST OFFICE BOX)	11075 HEARTH KD
	11075 HEARTH RD SPRING HILL FL 34608
	OFRING TITLE I'L STOOD
D. If any adding the presistant and any and for presistant d	office address in Florida anton the name of the
D. If amending the registered agent and/or registered onew registered agent and/or the new registered officers.	
	<del></del>
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
(C	City) (Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:
I hereby accept the appointment as registered agent. I am	
Signature of N	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	PT John Do Y Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	SHAUNA TRIANTAFILLO	SPRING HILL FL34609
2) Change Add	I	STEFANOS TRIANTAFIL	LOU 11411 LIBBY RD SPRING HILL FLEY609
	<u>P</u>	RACHAEL SCHULE	BROOKSVILLE FL 3460
4) Change Add Remove	I	DOROTHY BEYER	5024 CYNTHIA LANE SPRING HILL FL 34606
5) Change Add Remove			
6) Change Add Remove	<del></del>		

f amending or adding additional Art utach additional sheets. if necessary).	(Be specific)				
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			<del>" "</del>		

The date of each amendment(s) date this document was signed.	adoption:	, if other than th
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	re)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were was/were sufficient for appr	adopted by the members and the number of votes cast foroval.	or the amendment(s)
☐ There are no members or m adopted by the board of dir	embers entitled to vote on the amendment(s). The amendrectors.	ment(s) was/were
Dated	August 22: 2014	
Signature	amarda Wiggo	
have not	nairman or vice chairman of the board plesident or other of been selected, by an incorporator – if in the hands of a reduct appointed fiduciary by that fiduciary)	
	Amonda WigaS (Typed or printed name of person(stehing)	
	V. Prasident	
	(Title of person signing)	