## N14000004694

(Req	uestor's Name)	
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	ress)	
(City	/State/Zip/Phone	<del>=</del> #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer	
Special instructions to 1	J. H	ORNE 2 1 2022





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SECRETARY OF UTILITY OF SECRETARY OF UTILITY

## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: City SOCIET FC, Inc.  DOCUMENT NUMBER: N1400008698
DOCUMENT NUMBER: N14000008698
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Andres Colman.
(Name of Contact Person)
(Firm/ Company)
1014 Clare Que #4.
West-Palm Beach R 33401
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification) & mail. Com
For further information concerning this matter, please call:
Andres Colman  (Name of Contact Person)  at     Sull-386-8195     (Area Code) (Daytime Telephone Number)
(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:
S35 Filing Fee
Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section  Division of Corporations Division of Corporations
Division of Corporations  P.O. Box 6327  Division of Corporations  The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## Articles of Amendment

Articles of Amendment
Articles of Incorporation  City Soccer FC In
Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
cursuant to the provisions of section 617.1006. Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following mendment(s) to its Articles of Incorporation:
If amending name, enter the new name of the corporation:
The new ame must be distinguishable and contain the word "corporation" 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:  Principal office address MUST BE A STREET ADDRESS )
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, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  Name of New Registered Agent:
Name of New Registered Agent:  1016 Clare Que # 4  New Registered Office Address:  West laim Beh Florida 33401
(City) (Zip Code)  lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

UNUM COLMAN Signature of New Registered Agent, if changing

and address of each Off (Attach additional sheets Please note the officer/di P = President; V = Vice I	ficer and/or Direct is, if necessary) irector title by the President: T= Tre = Chief Financial	ctor being added: first letter of the office title; asurer; S= Secretary; D= Director; TR= Tr Officer. If an officer/director holds more th	r/director being removed and title, name,  rustee; C = Chairman or Clerk; CEO = Chief  ian one title, list the first letter of each office			
Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	ives the corporation	m, Sally Smith is named the V and S. These	PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,			
Example:  X Change X Remove X Add	PT         John D           V         Mike J           SV         Sally S	<u>ones</u>				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change Add	<u>PD</u>	BOISAJORE	1016 Clare ave #4			
Remove  2) Change Add	D	Andres Colman	West Palm Bih FZ 33401 1016 Clarx avety West Palm Bin FZ 33401			
Remove Change Add Remove						
4) Change Add						
Remove						
5) Change Add						
Remove						
6) Change Add						
Remove						
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)				
Please an	nend Re	gisterial agent and	d Remare			
A BUNI	4. Jox	\$				
I hange to Director Andres Colman						
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	02/10/20	
The date of each amendment(s) adoption: _	0//18/2022	, if other than the
date this document was signed.	001 -4	
Effective date if applicable:	07/18/2022	
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of	of State's records.	not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) wastures adopted by	the manuface and the number of sector and for the array 1	
was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wer adopted by the board of directors.	e
Dated	
Signature Undus Colman	
(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Andres Colman.	_
(Typed or printed name of person signing)	_
NVOCPTV	
(Title of person signing)	-