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DIVISION OF CORFORATIONS

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Jupiter S	Sharks Volley	/ball
DOCUMENT NUMBER: N1400000		
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Michael Kunda		•
	(Name of Contact Person	n)
Jupiter Sharks Volleyba	all	
	(Firm/ Company)	
PO Box 8533		
	(Address)	
Jupiter, FL 33468		
	(City/ State and Zip Cod	e)
jupitersharks@g		
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
Michael Kunda	_{at (} 407	492-5644
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee Certificate of Statu	& \$\square\$\$ \$\square\$\$ \$\text{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	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



15 FEB 17 Jupiter Sharks Volleyball Club, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N14000009576 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Jupiter Sharks Volleybail name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." "Company" or "Co." may not be used in the name. 409 Willet Avenue B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Jupiter, FL 33458 C. Enter new mailing address, if applicable: PO Box 8533 (Mailing address MAY BE A POST OFFICE BOX) Jupiter, FL 33468 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: Michael Kunda Name of New Registered Agent: 409 Willet Avenue (Florida street address) New Registered Office Address: **Jupiter** (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I application with and accept the obligations of the position.

Page 1 of 4

ature of 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 <math>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
l) Change	Р	Rhonda Kunda	PO Box 13193
Add	, .		NPB, FL 33408
X Remove			
2) Change	PD	Michael Kunda	PO Box 8533
$\frac{X}{X}$ Add			Jupiter, FL 33468
Remove			
3) Change	<u>T</u>	Amanda Tippin	PO Box 13193
Add		•	North Palm Beach
X Remove			FL, 33408
4) Change	S	Deborah Sauvage	PO Box 13193
, S			North Palm Beach
X Remove			FL, 33408
5) (1)			
5) Change	•		
Remove			
6) Change			
/ Add ·			:
Remove	,		

attach additional sheets	i, ij necessary).	(Be specific)			•	
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The date of each amendmen date this document was signed		, if other than th
Effective date <u>if applicable</u> :	2-13-15	SECRETARY OF STATE
	(no more than 90 days after amendment file date)	15 FEB 17 AM 11: 17
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/was/were sufficient for a	vere adopted by the members and the number of votes cast for the pproval.	amendment(s)
There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment directors.	(s) was/were
Dated <u>2-1</u>	3-15	
Signature	plat forta	
have	chairman or vice chairman of the board, president or other offic not been selected, by an incorporator — if in the hands of a receive court appointed fiduciary by that fiduciary)	
Michae	el Kunda	
	(Typed or printed name of person signing)	· ·
Presid	ent and Director	
	(Title of person signing)	