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COVER LETTER

TO: Amendment Section Division of Corporations

Bonita Youth Soc	cer, Inc.		
N15000001836			•
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
Paul C. Jensen			
	(Name of Contact Per	son)	
	(Firm/ Company)		
2001 16th Street North			
	(Address)		
St. Petersburg, FL 33704			
12- 242-1117	(City/ State and Zip Co	ode)	
St. Petersburg, FL 33704			
E-mail address: (to be use	ed for future annual repo	rt notificatio	n)
For further information concerning this matter, pleas	se call:		
Paul C. Jensen		27	825-0099
(Name of Contact Perso	on) (Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida De	partment of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	© □S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certit Certit (Addi	0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section		et Address ndment Sect	ion

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

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Bonita Youth Soccer, Inc.			·
(<u>Name of Corporation</u> as	currently filed with the Flor	ida Dept. of State)	TALLAHASSEE,
N15000001836			INCLADASSEC,
(Documen	nt Number of Corporation (if k	nown)	
ursuant to the provisions of section 617,1006, Florida mendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not Fo	r Profit Corporation v	idopts the following
. If amending name, enter the new name of the co	orporation:		
zzurri Storm Soccer Club, Inc.			The new
ame must be distinguishable and contain the word "c Company" or "Co." may not be used in the name	corporation" or "incorporated	I" or the abbreviation	"Corp" or "Inc"
. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADL</u>			
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u> </u>		
. If amending the registered agent and/or register new registered agent and/or the new registered		enter the name of th	<u>e</u>
Name of New Registered Agent:			
New Registered Office Address:	(FI	lorida street address)	
_		, Florida	ü
	(City)	(Zip	Coder
'ew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.		the obligations of the	position
	Signature of New Regist		

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Nar</u>	<u>ne</u>		Address
1) Change					
Add					
Remove					
2) Change					
Add					
Remove					
3) Change				 .	
Add					
Remove					
4) Change				<u> </u>	
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_		_ ,	
Add					
Remove					

uttach additional shee	ets, if necessary). ((Be specific)	here:		
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	P=				
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41-4-1					
	· <u>-</u>				

		, if other than the
date	Ethis document was signed.	
Eff	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be rument's effective date on the Department of State's records.	: listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes east 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 $\frac{10-215-18}{2}$	
	Signature	
	(By the endirman 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 spart appointed fiduciary by that fiduciary)	
	John DINA (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	