N 150000004466

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Do	cument Number)	——————————————————————————————————————
Certified Copies	Certificates	
Special Instructions to I	Filing Officer:	

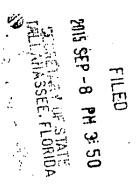




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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2015

William L. Fox Accurate Tax and Accounting 11799 SE US Hwy 441 Belleview, FL 34420

SUBJECT: SOUTH FLORIDA GOLD SPORTS ACADEMY, INC

Ref. Number: N15000004466

We have received your document for SOUTH FLORIDA GOLD SPORTS ACADEMY, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 915A00016585

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	GOLD SPORTS AC	ADEMY, INC	
N15000004466 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
WILLIAM L FOX			
	(Name of Contact Pe	erson)	
ACCURATE TAX AND ACCOUNTING			
	(Firm/ Company	·)	
11799 SE US HWY 441			
	(Address)	· -	
BELLEVIEW FL 34420			
(City/ State and Zip (Code)	
BELLEVIEWTAX@YAHOO.COM			
E-mail address: (to be used	for future annual rep	ort notification	
For further information concerning this matter, please of	eall:		
WILLIAM FOX	at	352	307-0015
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida D	Department of	State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is used)

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

FILED

SOUTH FLORIDA GOLD SPORTS ACADEMY		5013 2EL 0 111
(Name of Corporation as	currently filed with the	Florida Dept. of State A Y OF STATE
N15000004466		TALLAHASSEE, FLORIDA
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not	t For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorpor	ated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
Francipal office address <u>MOST BE A STREET ADD</u>	<u></u> -	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered of		da, enter the name of the
Name of New Registered Agent:	<u> </u>	
		(Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.		ept the obligations of the position.
	Signature of New Re	gistered 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	<u>PT</u> <u>V</u> <u>SV</u>	T John Doe Mike Jones V Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	SEC	TRANG WILLIAMS	170 NE 2ND STREET STE 591			
Add			BOCA RATON FL 33429			
X Remove						
2) Change						
Add						
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change						
Add						
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f amending or adding additional Arti ttach additional sheets, if necessary)	(Be specific)					
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The	date of each amer	July 30th 2015	_, if other than the
date	this document was	signed.	
Effe	ective date <u>if appli</u>		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not bate on the Department of State's records.	e listed as the
Adoption of Amendment(s)		ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient) was/were adopted by the members and the number of votes cast for the amendment(s) it for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	09-02-15	
	Signature		_
		(By the chairman 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 court appointed fiduciary by that fiduciary)	
		Michae Warson	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	