N15000006653

(Re	equestor's Name)	
(Ac	ldress)	33333 33
(Ac	dress)	
(Ĉi	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		!





000338668980

01/06/20~-01014--027 ++35.00

20 JAK -5 AN 8: 27



COVER LETTER

TO: Amendment Section

Division of Corporations Alva Babe Ruth/ Cal Ripken Inc. NAME OF CORPORATION: N15000006653 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jason Carney (Name of Contact Person) Alva Babe Ruth/ Cal Ripken Inc (Firm/ Company) (Address) Alva, Florida 33920 (City/ State and Zip Code) Alvabrcr@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jason Carney 292-2733 (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

Taliahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment Articles of Incorporation

		of .	
Alva Babe Ruth / Cal Ripken Inc			f State)
(Name of Corporation a	as current	ly filed with the Florida Dept. o	f State)
N15000006653			b b
(Docume	ent Numb	er of Corporation (if known)	3
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	da Statute	s, this <i>Florida Not For Profit Cor</i>	poration adopts the followin
A. If amending name, enter the new name of the	corporati	on:	
N/A			The nev
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.		ion" or "incorporated" or the ab	breviation "Corp." or "Inc."
R. Enter new principal office address if applicab	اما	Alva Community Park	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		21471 N. River Rd	
		Alva, Florida 33920	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		17660 Millers Gully Lane	
		Alva, Florida 33920	
D. If amending the registered agent and/or regist new registered agent and/or the new registere			ame of the
Jason Name of New Registered Agent:		ney	
Nume of New Negislereu Agent.	17660 M i	llers Gully Lane	
 New Registered Office Address:		(Florida street ad	ldress)
	Alva		33920
-		(City)	, Florida (Zip Code)
N B			

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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 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 J V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X Change	Pres	Jason Carney	17660 Millers Gully Lane
Add			Alva, Florida 33920
Remove			
2) Change	V.P	William March	19141 Persimmon Ridge
Add			Alva, Florida 33920
X Remove	т	Robert Boley	10540 Marie St.
3) Change	'		Fort Myers, Florida 33905
Add Remove			
4) Change	V.P.	Troy Bateman	15710 Old Olga Rd
X Add			Alva, Fl 33920
Remove			
5) X Change	s 	Cecilia Anderson	
Add			
Remove			
6) Change		Amanda Gee	
Add			
X Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	
N/a		
		_
		
		-

date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the members and the number of votes cast 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 1/1/2020
Signature Jaron Carney
(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)
Jason Carney
(Typed or printed name of person signing)
President
(Title of person signing)