## N15000008595

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2016 JUL 11 AMII: 42

Amend

JUL 18 2016

I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Tampa Bay Senior Softball Une.
	•
DOCUMENT NUMBER: <i>N 150 oc</i>	000 85 95
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
Char	//P. R. Bell (Name of Contact Person)
	(Name of Contact Person)
Morth Tampa Bai	1 Senior Soft Ball (Firm/Company)
21625 Nesting	CT. (Address)
Lutz, Florida	(City/ State and Zip Code)
E-mail address; (to	be used for future annual report notification)
For further information concerning this matter,	
Charlie R Bell	at <u>8/3 - 909 - 7999</u> Person) (Area Code) (Daytime Telephone Number)
	nade payable to the Florida Department of State:
•	
□ \$35 Filing Fee □\$43.75 Filing Certificate of \$	Fee & \$\Bigcup \$\\$43.75\$ Filing Fee & \$\Bigcup \$\\$52.50\$ Filing Fee  Status Certified Copy Certificate of Status  (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Street Address

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

(Name of Corporation as co	urrently filed with the Florida Dept. of State)
N1	5000008595
(Document l	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006. Florida S mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the tollowing no ration:  The new reporation or "incorporated" or the abbreviation "Corp." or "Inc."
A. If amending name, enter the new name of the corr	poration:
name must be distinguishable and contain the word "con Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principa Loffice address, if applicable:	21625 Nesting Ct.
Principal office address <u>MUST BE A STREET ADDR</u>	
	33549
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NT 855
	23110 State Rd 54 # 275
	Litz, Il. 33549
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter the name of the fice address:
Name of New Registered Agent:	Charlie R. Bell
	Charlie R. Bell 21625 Nesting Ct. (Florida tree) uddress)
New Registered Office Address:	•
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	tered Agent: 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 I V Mike . SV Sally S	<u>Jones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>c</u>	Walt Bockmiller	5555 Shasta Place (LOL) Land o Lakes F1. 34639
2) Change Add Remove	<u> </u>	Brian Peterman D	LAND O LAKES F1.
3 ) Change Add X _ Remove	<u>T</u>	CYNTHIA E. Rush	19236 FISHELMANS BEND DR LUTZ, FI 33558
4) Change Add Remove	<u> </u>	Stephen L. Hyde	30114 SOTOGRANDE LOOP Wesley Chapel, Fl. 33543
5) Change Add Remove	<u>C</u>	Jim McCausey	3134 Stonegate Falls LAND OLAKES, Fl. 34638
6) Change Add Remove	I	JAY CARTER	5508 Reflections BLVd Lutz, Fl. 33558

. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	ere.		
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The date of each amendment(s) adoption:	, if other than the
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 document's effective date on the Department of State's records.	late will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was/were sufficient for approval.	nent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/adopted by the board of directors.	were
Dated 7-7-16	
Signature Auch R BULL  (By the chairman or vice chairman of the board, president or other officer-if dire	
have not been selected, by an incorporator – if in the hands of a receiver, truste other court appointed fiduciary by that fiduciary)	
CHARLES R BELL	<u></u>
(Typed or printed name of person signing)	
DEPUTY COMMISSION (Title of person signing)	OFR