

N15000010704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

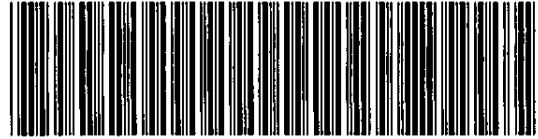
(Business Entity Name)

(Document Number)

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11/15/16--01007--001 \*\*25.00

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RECEIVED  
2016 NOV 14 PM 5:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NC  
DEC 06 2016  
R. WHITE

16 DEC -5 AM 11:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 18, 2016

VINCENT UNNERSTALL  
500 FRIDAY RD  
COCOA, FL 32926

SUBJECT: AMERICAN SPORTS CONSULTANTS, LLC  
Ref. Number: N15000010704

We have received your document for AMERICAN SPORTS CONSULTANTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

This corporation filing was filed by this office in error. The above referenced entity was previously filed as a non-profit corporation and therefore cannot have the suffix "LLC" please provide us with a corporate suffix to replace the "LLC" suffix. Such corporate suffixes include: Inc, Corp, Corporation, Incorporation, etc.

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.

Rebekah White  
Regulatory Specialist II

Letter Number: 716A00024845

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: American Sports Consultants, LLC

DOCUMENT NUMBER: N15000010704

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bridgit Land

(Name of Contact Person)

American Sports Consultants

(Firm/ Company)

500 Friday Road

(Address)

Cocoa, FL 32926

(City/ State and Zip Code)

americansportsconsultants2000@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bridgit Land

(Name of Contact Person)

at

407

(Area Code)

390.9434

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

**\$10 additional  
fee**

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
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

Street Address

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

16 DEC -5 AM 11:33

American Sports Consultants, LLC

(Name of Corporation as currently filed with the Florida Dept. of State)

N15000010704

(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:

American Sports Consultants, Inc.

*The new*

*name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

1) <input type="checkbox"/> Change	<u>MGR</u>	<u>Jeffrey Unnerstall</u>	<u>500 Friday Road</u>
<input type="checkbox"/> Add			<u>Cocoa, FL 32926</u>
<input checked="" type="checkbox"/> Remove			

2) <input type="checkbox"/> Change	<u>MGR</u>	<u>Dustin Unnerstall</u>	<u>500 Friday Road</u>
<input checked="" type="checkbox"/> Add			<u>Cocoa, FL 32926</u>
<input type="checkbox"/> Remove			

3) <input type="checkbox"/> Change	<u>AMBR</u>	<u>Vincent Unnerstall</u>	<u>500 Friday Road</u>
<input checked="" type="checkbox"/> Add			<u>Cocoa, FL 32926</u>
<input type="checkbox"/> Remove			

4) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>

5) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>

6) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

N/A

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 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 11.28.11

Signature Vincent Unnerstall  
(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)

Vincent Unnerstall  
(Typed or printed name of person signing)

AMBR  
(Title of person signing)