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COVER LETTER

Division of Corporations NAME OF CORPORATION: Jacket Hoops Club INC. DOCUMENT NUMBER: N16000004963 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jessica HOOPS Club 2800 N. 6th St, Unit 1, PMB St. Augustine, F1, 32084
(City/State and Zip Code) i a c/Cethoop Sclube amail. com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (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 Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

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

JACKET HOOPS CLUB INC

(Name of Corporation as currently filed with the Florida Dept.	of States: - 2 PH 1: 11
N16000049 63	or state)
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Coamendment(s)</i> to its Articles of Incorporation:	orporation adopts the following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the a "Company" or "Co." may not be used in the name.	bhreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 new registered agent and/or the new registered office address:	name of the
Name of New Registered Agent: Jessica CooKse	Ч
Name of New Registered Agent: Jessica Cookse 2800 N 6 th St, Un	it 1, PMB #22
New Registered Office Address:	naaress)
St. Augustine	, Florida <u>32084</u> (Zip Code)
Now Designated Assent's Signature if shoughs Designated Assent	•
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the obligation of the control of the	tions of the position.
Signature of New Registered Agen	t, 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 D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)	У	Alyssa Kelley	125 Deltona Blvd St. Augustine F1, 32086
2) Change Add Remove	<u>P</u> _	Jessica Cooksey	11 Beach St. St. Augustine FL 32080
3) Change Add Remove	S	Megan Young	3 Clark Street St. Augustine F1, 32084
4) Change Add Remove	<u>S</u> _	Megan Kiker	864 Tides End Dr. St. Augustine FL, 32080
5) Change Add Remove	<u>V</u>	Margaret Gord	Y 25 Cincinnativ Ave St. Augustine, Fl 3 7084
6) Change Add Remove			

f amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)			
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 311 2026	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable stantagery filing requirements, this date will a document's effective date on the Department of State's records.	ot 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(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 2-26-20	
Signature(By the 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)	
Jessica Cooksey	
(Typed or printed name of person signing)	
President	
(Title of person signing)	