11600006764

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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Blue NAME OF CORPORATION:	e Blood Brotherhood	l, Inc.			
N16000	006764				
DOCUMENT NUMBER:					
The enclosed Articles of Amendment	and fee are submittee	for filing.			
Please return all correspondence conc	erning this matter to t	he following:			
Joseph A. Heintz, Jr.					
	(Nan	ne of Contact Person))		
The Law Office of Joseph A, Hein	tz, Jr. P.A.				
		Firm/ Company)			
750 Tamiami Trail, #2A					
		(Address)			
Port Charlotte, FL 33953					
	(City	/ State and Zip Code)		
jheintz@jheintzlaw.com					
E-mail add	lress: (to be used for f	uture annual report no	otification)	
For further information concerning th	is matter, please call:				
Joseph Heintz		at	-206-22 2		
(Name of	Contact Person)	(Are	a Code)	(Daytime Telephone	Number)
Enclosed is a check for the following	amount made payable	to the Florida Depar	tment of S	State:	
-	(A	3.75 Filing Fee & rtified Copy dditional copy is closed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address Amendment Section	1	Street A Amendo	i <mark>ddress</mark> nent Sectio	on	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment to Articles of Incorporation of

FILED

Blue Blood Brotherhood, Inc.	20	18 AUG 27 P
(Name of Corporation as co	urrently filed with the Florida Dep	1. of State) 5: \$3
N16000006764	MEL	AHASSELT STATE
(Document l	Number of Corporation (if known)	JEE FEURIDA
Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit	Corporation adopts the following
A. If amending name, enter the new name of the corp	ooration:	
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the	The new abbreviation "Corp." or "Inc.'
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)	

C. Enter new mailing address, if applicable:	/	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>		
	-	
	- then to	
D. If amending the registered agent and/or registered		e name of the
new registered agent and/or the new registered of	fice address:	
Name of New Registered Agent:	7.7	
	(Florida stree	at address (
New Registered Office Address:	i initial week	i uauressy
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. It	tered Agent: am familiar with and accept the oblig	zations of the position.
	Signature of New Registered Age	ent 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	V Mik	n Dog te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TS	Duane Coldiron	750 Tamiami Trl, #2A
Add			Port Charlotte, FL 33953
X Remove			
2) Change	VP	Matt Noftz	750 Tamiami Trl, #2A
Add X Remove			Port Charlotte, FL 33953
3) Change	s	Jeff Markland	750 Tamiami Trl, #2A
X Add			Port Charlotte, FL 33953
Remove			
4) Change	<u>c</u>	Josh Hopkins	750 Tamiami Trl, #2A
X Add			Port Charlotte, FL 33953
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
and the State Control	
	/
	· · · · · · · · · · · · · · · · · · ·
/	

Page 3 of 4

	08-01-2018	
The date of each amendmen		, if other than the
date this document was signed	d.	
	08-01-2018	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members o adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	01-2018	
Dated		
re!		
Signature		
	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
	court appointed fiduciary by that fiduciary)	
onici	coult appointed inductary by that inductary)	
Ja	ames W. Browning	
	(Typed or printed name of person signing)	
Pı	resident	
	(Title of person signing)	