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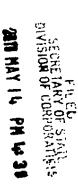
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## **COVER LETTER**

SECRETARY OF STATE SIVISION OF CORPORATION

**TO:** Amendment Section Division of Corporations

2011 MAY 14 PH 44 38

Southridge Baseball Booster Club Inc.  NAME OF CORPORATION:
DOCUMENT NUMBER: N 1600012062
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Suzanne Tabares
(Name of Contact Person)
Southridge Baseball Booster Club Inc.
(Firm/ Company)
14729 SW 142nd ST
(Address)
Miami, FL 33196
(City/ State and Zip Code)
stabarcs@bellsouth.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: 5368327
Suzanne Tabares 305 5858327
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  S35 Filing Fee 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, Ft. 32301

## Articles of Amendment to Articles of Incorporation of



28 HAY 14 PH 4:39

Southridge Baseball Booster Club Inc.		
(Name of Corporation as curr	ently filed with	the Florida Dept. of State)
Λ	[[[]	00/20102
(Document Nu	mber of Corporat	ion (if known)
Pursuant to the provisions of section 617,1006, Florida Stat amendment(s) to its Articles of Incorporation:	tutes, this <i>Florida</i>	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "inco	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	55)	
C - Untou now moiling address if annioables		
Athition addings MAY BE CROST OFFICE ROY)		
D. It amending the registered agent and/or registered of new registered agent and/or the new registered office		Florida, enter the name of the
<u>ivew negrsierea Opice nauress.</u>	-	(Florida xtreet addresy)
		. r ioriga
	*,~ •	7 0
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		d accept the obligations of the position.
-	Signature of Na	w Registered Angus 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	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>T</u>	Yasmira Abreu	14998 SW 140 Terrace
Add			Miami, FL 33196
X Remove			<del></del>
2) Change	<u>v</u>	Mayra Andalia	20825 SW 236 ST
Add			Miami, FL 33031
X Remove			
$\frac{X}{X}$ Change	VT	Jose Tabares	14729 SW 142 ST
Add			Miami, Fl. 33196
Remove			<del></del>
4) Change	<u>v</u>	Pablo Victoria	
Add			
Remove			
5) Change	v	Guillermo Del Calvo	27301 sw 140 ct
Add Add			Homestead, Fl. 33032
Remove			
6)Change			
Add		<del></del>	
Remove			***************************************

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The date of each amendment(s) adoption:late this document was signed.		_, if other than the	
1916	tins document was signed.		
Effe	ective date if applicable:		
	(no more than 90 days after amendment file date)		
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not bument's effective date on the Department of State's records.	e listed as the	
Ado	option of Amendment(s) ( <u>CHECK ONE</u> )		
×	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 MCU 10.2018 Signature II MAN All II		
	(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)	_	
	Suzcince Tcher(C5 (Typed or printed name of person signing)		
	President (Title of person signing)		