

N17000009095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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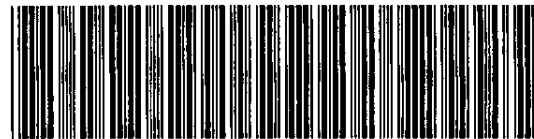
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2018 APR 19 PM 3:38  
SECURITY DIVISION  
MILWAUKEE, WISCONSIN

Amend/CC

APR 19 2018  
I ALBRITTON

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** FLORIDA FORCE BASEBALL ACADEMY CORP

**DOCUMENT NUMBER:** N17000009095

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

Please return all correspondence concerning this matter to the following:

JOSE GIL

(Name of Contact Person)

FLORIDA FORCE BASEBALL ACADEMY CORP

(Firm/ Company)

10467 CORKSCREW COMMONS DR #104

(Address)

ESTERO, FL 33928

(City/ State and Zip Code)

JGTRACON@GMAIL.COM

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

For further information concerning this matter, please call:

JOSE GIL

786

261-9873

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

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

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

Note: I also want to request a Certified letter  
of how a non-profit corp.





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 1, 2018

MICHAEL T. FITZSIMMONS  
FLORIDA FORCE BASEBALL ACADEMY CORP  
20661 GROVELINE CT  
ESTERO, FL 33928

SUBJECT: FLORIDA FORCE BASEBALL ACADEMY CORP  
Ref. Number: N17000009095

We have received your document for FLORIDA FORCE BASEBALL ACADEMY CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 418A00002184

RECEIVED  
18 APR 19 PM 2:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

FLORIDA FORCE BASEBALL ACADEMY CORP

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

N17000009095

(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:**

*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:

\_\_\_\_\_, Florida  
(City) (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*

*(Attach additional sheets, if necessary)*

*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.*

**Example:**

**Address**

Page 2 of 4

SEE ATTACHED. DOCUMENTS

Page 3 of 4

# **Amendments Article of Corporation For**

## **Florida Force Baseball Academy Corp.**

The undersigned incorporator, for the purpose of forming a Florida not-for-profit corporation, hereby adopts the following Articles of Incorporation:

### **Article I**

The name of the Corporation is:  
FLORIDA FORCE BASEBALL ACADEMY CORP

### **Article II**

The principal place of business address:  
20661 GROVELINE CT  
ESTERO, FL 33928

The Mailing Address of the Corporation is:  
20661 GROVELINE CT  
ESTERO, FL 33928

### **Article III**

THE SPECIFIC PURPOSE FOR WHICH THIS CORPORATION IS ORGANIZED IS:

This Corporation non-profit 501 (c) (3) is exclusively for Charities to provide training and support to the Baseball Academy. Providing Training and support to Local, National and International Sports Organizations. Conduct Fundraising and Sponsorship to support these organizations. Conduct Competitions /Tournaments for development of these organizations.

The manner in which directors are selected or appointed is:  
AS PROVIDED FOR IN THE BYLAWS.

### **Article V**

The name and Florida Street Address of the registered agent is:  
FITZSIMMONS, MICHAEL T  
20661 GROVELINE CT  
ESTERO, FL 33928

I certify that I am familiar with and accept the responsibilities of registered agent.  
Registered Agent Signature: MICHAEL T. FITZSIMMONS

### **Article VI**

The name and address of the incorporator is:  
FITZSIMMONS, MICHAEL T  
20661 GROVELINE CT  
ESTERO, FL 33928

Electronic Signature of Incorporator: MICHAEL T FITZSIMMONS

I am the incorporator submitting these Articles of Incorporation and affirm the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following of this corporation and every year thereafter to maintain "active" status.

#### **Article VII**

The initial officer(s) and/or Director (s) of the corporation is/are:

Title: PRESIDENT  
GIL, JOSE  
10467 CORKSCREW COMMONS DR. #104  
ESTERO, FL 33928

Title: Director  
FITZSIMMONS, MICHAEL T  
20661 GROVELINE CT.  
ESTERO, FL 33928

Title: Director  
MEDINA, XAVIER  
10233 SILVER PALM DR.  
ESTERO, FL 33928

#### **Article VIII**

The effective date for this corporation shall be:  
September 01, 2017

#### **Article IX**

The effective date for these Articles shall be:  
April 02, 2018



04/02/2018

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

04/02/2018

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.

04/02/2018

Dated \_\_\_\_\_

Signature \_\_\_\_\_

(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)

JOSE GIL

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)