N18000001633

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TO: Amendment Section Division of Corporations

NAME OF CORPORATI		DEVILS SPORTS GRO	OUP, INC.			
DOCUMENT NUMBER:	N18000001633					
The enclosed Articles of Ar	nendment and fee are sub	omitted for filing.				
Please return all correspond	lence concerning this mat	ter to the following:				
CAROF MUNOZ						
	· · · · · · · · · · · · · · · · · · ·	(Name of Contact Pe	erson)			
SUNILAND SUNDEVILS	SPORTS GROUP, INC.					
		(Firm/ Company	/)			
14557 SW 160TH ST						
		(Address)	_			
MIAMI, FL 33177						
		(City/ State and Zip	Code)			
CNRMUNOZ07@GMAIL	COM					
	E-mail address: (to be use	d for future annual rep	ort notification	1)	23	: <u>'</u>
For further information con	cerning this matter, pleas	e cafl:			=	; ;
CAROF MUNOZ		at	786	247-1419	 	
	(Name of Contact Person		(Area Code)	(Daytime Telephor	ne Number) 25	
Enclosed is a check for the	following amount made p	payable to the Florida	Department of	(Daytime Telephorestate:		
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	icate of Status ied Copy tional Copy is	žn	CR/AT1085
Mailing .	Address	_	reet Address	ion		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SUNILAND SUNDEVILS SPORTS GROUP, INC.

Name of Corporation as currently filed with the Flor	rida Dept. of State)	
N18000001633		
(Document N	Number of Corporation (if I	(nown)
Pursuant to the provisions of section 617,1006, Florida S amendment(s) to its Articles of Incorporation:	statutes, this <i>Florida Not F</i>	for Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	ooration:	
N/A		The new
name must be distinguishable and contain the word "cor "Company" or "Co," may not be used in the name.	poration" or "incorporate	d" or the abbreviation "Corp " or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDR	ESS)	
	<u> </u>	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14557 SW 160TH 5	ST
	MIAMI, FL 33177	
		20
		· = 6
D. If amending the registered agent and/or registered		, enter the name of the
new registered agent and/or the new registered of		
Name of New Registered Agent:	ROF MUNOZ	
1455	57 SW 160TH ST	:: 5
New Registered Office Address:	d	Florida street address)
MIA	AMI	33177
 -	(City)	, Florida, (Zip Code)
	(Cuiv)	(My Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	tered Agent:	at the whitestians of the position
т петену иссері іне аррынішені ак тедіметей адеті. Та	um jaminar wan ana ageep	i ne spingunous of the position.
	MADE	hino.
	Signature of New Regis	stered Agent, Schanging

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 Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>T</u>	NATASHA WYLIE	12750 SW 119TH ST MIAMI, FL 33156
× Remove			
2) × Change Add	VPT	ROCA NOVO	13260 SW 96TH ST MIAMI, FL 33186
Remove 3) Remove Add Remove			
4) Change Add			
Remove 5)ChangeAdd			
Remove 6) Change Add			
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)	
		····	

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		·····
		
		
		
		
<u> </u>		
	06/05/2020	
The date of each amendment(s) adoption date this document was signed.	n: 06/05/2020	_, if other than
Effective date <u>if applicable</u> : 06/05/2020)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not ent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

sted by the board of directors.	adopted by the board
06/05/2020	e
Dated	Dated _
Signature and Muno	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	h
other court appointed inductary by that fiductary)	o
\smile	
CAROF MUNOZ	
(Typed or printed name of person signing)	
SECRETARY	
(Title of person signing)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were