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COVER LETTER

Division of Corporations Tallahassee Soccer Club, Inc. NAME OF CORPORATION: N18000002271 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Christopher T. Petley (Name of Contact Person) Tallahassee Soccer Club, Inc. (Firm/ Company) 522 East Park Ave Suite 201 (Address) Tallahassee, FL 32301 (City/ State and Zip Code) Chris@tlhsoccerclub.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 850 528-5461 Christopher T. Petley (Daytime Telephone Number) (Area Code) (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 Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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ahassee Soccer Club, Inc.			16 11 m
(Name of Corporation as current)	y filed with the Florida Dept	. of State)	SASSEE CLOB
: #: N18000002271			and the state of t
(Document Number	r of Corporation (if known)		
nant to the provisions of section 617,1006, Florida Statutes, idment(s) to its Articles of Incorporation:	, this <i>Florida Not For Profit C</i>	Corporation	radopts the following
f amending name, enter the new name of the corporation	n:		
			The new
must be distinguishable and contain the word "corporation pany" or "Co." may not be used in the name.	on" or "incorporated" or the o	ahbreviatio	on "Corp." or "Inc."
nter new principal office address, if applicable:	522 East Park Ave Suite 201		
* 1 ce 11 . Microp of a control and becco	Tallahassee, FL 32301		
Enter new mailing address, if applicable: Mailing address <u>MAY BE A POST OFFICE BOX</u>)	522 East Park Ave Suite 201		
	Tallahassee, FL 32301		
f amending the registered agent and/or registered office		e name of	<u>the</u>
	<u> </u>		
Name of New Registered Agent:			
Nan Ranistarad Office Address:	(Florida stree	t address)	
new negisierea (gin e naures).			
	(Circl	Flor	
	(Cary)	(2.	p conc)
Registered Agent's Signature, if changing Registered A why accept the appointment as registered agent. I am fam		ations of th	ue position.
			
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: Registered Agent's Signature, if changing Registered Agent and fam	(City)	t address) Flor (Z. gations of th	ida ip Code) ae position.

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 = ChiefExecutive 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	$\underline{\mathbf{V}}$ $\underline{\mathbf{N}}$	<u>ohn Doe</u> like Jones ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	В	Raquel Simon- Petley	5383 Appledore Lane
XAdd			Tallahassee, FL 32309
Remove			
2) Change	В	Giavona Williams	522 East Park Ave
X Add			Tallahassee, FL 32301
Remove			
3.) Change	B	Michael J. Bonfanti	325 John Knox Rd
X Add			Atrium Building Suite 105
Remove			Tallahassee, Fl 32303
4) Change			
Add	·-		
Remove			
5) Change			
Add			
Remove			
			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:					
(attach additional sheets, if necessary). (Be specific)					
Add FEIN: Tallahassee Soccer Club, Inc FEIN: 82-4622976					
-					

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		· · · · · · · · · · · · · · · · · · ·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date will rurtment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s) $\frac{1}{4\kappa} = \frac{1}{2}$	
There are no members or member adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated7	7/18/2018	
Signature	3 tt	
have not been	nan or vice chairman of the board, president or other officer-if directors i selected, by an incorporator — if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
Brent Edso	on	
	(Typed or printed name of person signing)	
Board Mer	mber/ Treasurer	
	(Title of person signing)	