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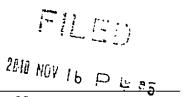
COVER LETTER

FO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: 19 SPORTS ASSO	CIATION - CHAPTER 84	A, INC		
	1BER: N18000008708				
	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	JOHN SCHULZ				
		Name of Contact Person	9		
	ALL ACCOUNTING SERVICES II INC				
		Firm/ Company			
	6907 STIRLING ROAD				
	Address				
	DAVIE, FL 33314				
		City/ State and Zip Cod	v		
JUS	STIN.CHERESNICK@19SPOR	TS.COM			
		sed for future annual report	notification)		
For further informat	ion concerning this matter, pleas	se call:			
JOHN SCHULZ		954 at (de & Daytime Telephone Number		
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ai Di P.	ailing Address mendment Section ivision of Corporations O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building			
T_i	allahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



to

19 SPORTS ASSOCIATION - CHAPTER 84A, INC.

(<u>Name of</u> (18000008708	Corporation as currently	: filed with the Florida De	nt of State)
18000008708		The or the transfer for	pt. or state)
			Manager Committee Committe
	(Document Number of	Corporation (if known)	
ursuant to the provisions of section 607.1- s Articles of Incorporation:	006, Florida Statutes, this I	Florida Profit Corporation	adopts the following amendmen
. If amending name, enter the new nar	ne of the corporation:		The new
ame must be distinguishable and conta Corp.," "Inc.," or Co.," or the designa ord "chartered," "professional associati	tion "Corp." "Inc." or "C	Co". A professional corpo	porated" or the abbreviation
. Enter new principal office address, it Principal office address <u>MUST BE A ST</u>		<i>N/A</i>	
. Enter new mailing address, if applic (Mailing address <u>MAY BE A POST O</u>			
. If amending the registered agent and new registered agent and/or the new			ame of the
Name of New Registered Agent	NA		
	6907 STIRLING ROAD		
-	(Florida spe	vet address)	
ī			33314
New Registered Office Address:	DAVIE	(City)	, Florida

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	<u>PT</u>	John Di	<u>ne</u>	
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	s		NOELLE CHERESNICK	2688 NW 123 TERRACE
Add				CORAL SPRINGS, FL 33060
X Remove				
2) Change	S		JOEL CHERESNICK	4364 NW 67TH WAY
X Add				CORAL SPRINGS, FL 33067
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Add				

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
/A	
<u> </u>	
-	
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

. .	11/13/2018	18 and a supplier of a
The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.	/.	
	$\Lambda I/\Lambda$	
Effective date if applicable:	(no more than 90 days after amendme	mt tile data)
	(no m ore than 90 days after amenante	ne ine aare)
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing rument of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	d by the shareholders. The number of votes east fient for approval.	for the amendment(s)
☐ The amendment(s) was/were appromist be separately provided for ea	yed by the shareholders through voting groups. The ch voting group entitled to vote separately on the	he following statement amendment(s):
	the amendment(s) was/were sufficient for approx	ral
bv	(voting group)	
	(voting group)	<u>—</u> `
The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action	n and shareholder
11/13/2018		
Dated		
Signature	110000	
	or, president of other officer - i) directors or off	ficers have not been
	y an incorporator - if in the hands of a receiver,	
	fiduciary by that fiduciary)	
24.1		
JC	HN SCHULZ	
	(Typed or printed name of person signin	g)
TI	REASURER	
_	(Title of person signing)	