## N18000011725

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

Juega Como Can	npeon Inc	•	
N18000011725 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this r	natter to the following	<u>:</u> :	
Daniel Brennan			
	(Name of Contac	t Person)	
Juega Como Campeon Inc			
	(Firm/ Comp	pany)	
20 Canterbury Lane			
	(Address	;)	
Summit, NJ 07901			
	(City/ State and 2	Zip Code)	
daniel.j.brennan@comcast.net			
E-mail address: (to be	used for future annual	report notification	n)
For further information concerning this matter, ple	ease call:		
Daniel Brennan		847 at	691.1987
(Name of Contact Per	rson)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount mad	le payable to the Flori	da Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat	•	Certi py is Certi (Add	0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section of Corp The Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Juega Como Campeon Inc			
(Name of Corporation as currently filed with the	e Fl <u>orida I</u>	Dept. of State)	
N18000011725			
(Docum	nent Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida Not For Profit Corporation</i> adopts	the following
A. If amending name, enter the new name of the	e corporat	ion:	
n/a			Th
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		tion" or "incorporated" or the abbreviation "Corp	The new o." or "Inc."
B. Enter new principal office address, if applica	ıble:	1655 E Classical Blvd	
(Principal office address <u>MUST BE A STREET A</u>		Delray Beach, FL	
		33445	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u> )	1655 E Classical Blvd	
		Delray Beach, FL	
		33445	- ~
D. If amending the registered agent and/or regi			020 SEP
new registered agent and/or the new register	n/a	ddress:	25
Name of New Registered Agent:		(かけ) - <u>- カロ</u> (市)と	<u></u>
None Benjataan LOGia e telebrara		(Florida street address)	- AM -
<u>New Registered Office Address</u>	n/a	Florida	<b>1</b> 0
		(City) (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			m.
_		n/a	
	Si	gnature of New Registered Agent, 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	PT         John D           Y         Mike John S           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		n/a	
Remove			
2) Change Add			
Remove 3 ) Remove Add Remove			
4) Change Add	<del></del>		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee) n/a	g additional Art ts, if necessary).	icles, enter change(s) here: (Be specific)	
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	(s) adoption:	
date this document was signed.		, if other than the
Effective date if applicable:	September 21, 2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes east for the amendment(s) proval.	

Dated	September 21, 2020
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)
	Daniel Brennan
	(Typed or printed name of person signing)
	Treasurer and Director