(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	÷ #)
PICK-UP	MAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

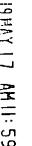




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C. GOLDEN JUN - 3 2019

COVER LETTER

TO: Amendment Section Division of Corporations

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mitted for filing.		
er to the following:		
(Name of Contact Perso	n)	
(Firm/ Company)		
(Address)		
(City/ State and Zip Coo	le)	
for future annual report	notification	1)
call:		
) (/	rea Code)	(Daytime Telephone Number)
yable to the Florida Dep	artment of	State:
□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
	mitted for filing. er to the following: (Name of Contact Perso (Firm/ Company) (Address) (City/ State and Zip Cod for future annual report call: at	(Name of Contact Person) (Firm/ Company) (Address) (City/ State and Zip Code) for future annual report notification call: at 561 (Area Code) yable to the Florida Department of Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) (Additional copy is certified Code)

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



UNITED STATES JUNIOR GOLF ORGANIZATION, INC.

		2019 MAY 17 AM
(Name of Corporation as	currently filed with the Florid	a Dept. of State)
	N19000001713	
(Document	Number of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For I	Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicables (Principal office address <u>MUST BE A STREET ADD</u>		
		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>X</u>)	
		-
D. If amending the registered agent and/or register		iter the name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent:		
	(Flor	ida street address)
New Registered Office Address.		
	(C:)	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept th	e obligations of the position.
	Signature of New Register	ed Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, at 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change X_Remove X_Add	<u>V</u> <u>Mik</u>	n Doc e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	PD	RUSSELL L. BACIGALUPI	6091 GOLF VILLAS DRIVE
Add			BOYNTON BEACH, FL 33437
Remove			<u>US</u>
2) X Change	VPD	ANGELEIGHA BACIGALUPI	6091 GOLF VILLAS DRIVE
Add			BOYNTON BEACH, FL 33437
Remove			US
	SD	MARIANNE SCHIER	376 ARGUELLO BLVD
3) Change X			SAN FRANCISCO, CA 94118
Add Remove			US
	TD	DEBRA BULLOCK	820 CORDOVA LOOP
4) Change X			SEGUIN, TX 78155
Add Remove			US
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E.	If amending or adding additional As (attach additional sheets, if necessary).	ticles, enter chan	<u>ige(s) here</u> :					
	(attach additional sheets, if necessary).	(Be specific)						
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The date of each amendment(s) ado	ption:	, if other than th
late this document was signed. 05/15/	2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this da artment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendm	ent(s)
There are no members or member adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/wis.	ere
Dated MAY 15TH	2019	
Signature X	23 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
have not been	nan or wee chairman of the board, president or other officer-if direct selected, by an incorporator – if in the hands of a receiver, trustee oppointed fiduciary by that fiduciary)	
RUSSELI	L. BACIGALUPI	
	(Typed or printed name of person signing)	
PRESIDE	NT	
	(Title of person signing)	