N1900000 1964

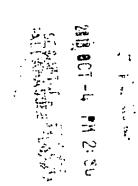
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COVER LETTER

Division of Corporations NAME OF CORPORATION: South FL. FOOTBALL ACAdemy INC DOCUMENT NUMBER: N 19000001964 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John Hurst

(Name of Contact Person)

South FL Foot Ball Academy INC.

(Firm/ Company) 11890 FIOTILIA PIACE (Address) BOCA RATON F1 33428
(City/State and Zip Code) GBYSA—Admin O-GBYSA. OPG E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tohn HypsT at 561 706 15.37
(Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: 図\$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status

(Additional copy is

enclosed)

Mailing Address

TO: Amendment Section

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

Street Address

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

Certified Copy

(Additional Copy is Enclosed)

Articles of Amendment

to
Articles of Incorporation
of

South FL Foot Ball A	CAdemy	INC	
(Name of Corporation as curre	ently filed with the F	Florida Dept. of State)	197
N 1900000 1964			
(Document Num	nber of Corporation (i	if known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:		For Profit Corporation ad	opts the following
A. If amending name, enter the new name of the corpora	<u>ition:</u>		
name must be distinguishable and contain the word "corpor	ation" or "incorpora	nted" or the abbreviation "(The new Corp." or "Inc."
"Company" or "Co." may not be used in the name.			
B. Enter new principal office address, if applicable:		FloTillA PIA	1ce
(Principal office address <u>MUST BE A STREET ADDRESS</u>	BOCA	FloTillA PLA RATON Fl.	33428
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office.	ice address in Florid	a, enter the name of the	
new registered agent and/or the new registered office a	address:	at enter the name of the	
	bu HURS		
	890 FloTI	IA IACC (Florida street address)	
New Registered Office Address:	ı	i toriuu sireet uuuressy	
Boo	City)	, , Florida (Zip Cod	<u>33428</u> de)
ew Registered Agent's Signature, if changing Registered	Agent:		
hereby accept the appointment as registered agent. I am fai	miliar with and accep	ot the obligations of the pos	ition.
	John &	Stered Agent, if changing	
Si	ignature of New Regis	stered 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 V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	V	Jenniser Capulo	BOCA RATON Fl 33434
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
(f) Change Add Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)			
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The	e date of each amendment(s) adoption:	_, if other than the
dare	e this document was signed.	_
Eff	ective date if applicable:	
	(no more than 90 days after amendment file date)	
<u>Not</u> doc	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
Ø	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 9/27/19	
	Signature John Will	_
	(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)	
	Tohn HURST (Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	