N19000008472

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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Emily Nume)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer.	
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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	otball Foundation of Florid	a Inc		
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee	are submitted for filing.			
Please return all correspondence concerning the	nis matter to the following:			
Kimberly Phillips				
	(Name of Contact	Person)		
Women's Football Foundation of Florida Inc.				
	(Firm/ Compa	ny)		
3505 Trout River Blvd				
	(Address)			
Jacksonville, FL 32208				
	(City/ State and Zi	p Code)		
kimrockybrown@gmail.com				
E-mail address: (to	be used for future annual r	eport notificatio	n)	
For further information concerning this matter	, please call:			
Kimberly Phillips	;	904 at	334-5026	
(Name of Contact		(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount	made payable to the Florida	a Department of	State:	
□ \$35 Filing Fee □\$43.75 Filing Certificate of		Certil r is Certil (Addi	Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ā D	treet Address Amendment Sect Division of Corp The Centre of T	orations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of Women's Football Foundation of Florida Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N19000008472 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 3505 Trout River Blvd B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Jacksonville, FL 32208 C. Enter new mailing address, if applicable: 3505 Trout River Blvd (Mailing address MAY BE A POST OFFICE BOX) Jacksonville, FL 32208 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Kimberly Phillips Name of New Registered Agent: 3505 Trout River Blvd (Florida street address) New Registered Office Address: Jacksonville (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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 Do V Mike Jo SV Sally Sr	nes		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change Add	<u>P</u>	Christopher T. Jones	76917 Timbercreek Blvd Yulee, FL 32097	
× Remove				
2) Change Add	<u>v</u>	Marcia J. Cook	1313 Covington Dr. Tallahassee, FL 32312	
Remove 3) X Change Add Remove	<u>P</u>	Kimberly Y. Phillips	3505 Trout River Blvd Jacksonville, FL 32208	
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)				
N/A				
-				

		
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The date of each amendmendate this document was signed	t(s) adoption:	, if other than the
	9/26/23	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this dat the Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/v was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment pproval.	ent(s)

Dated	9/26/23
Signatur	
	(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)
	Kimberly Y. Phillips
	(Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.