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COVER LETTER

TO: Amendment Section Division of Corporations

SPRING HILL YO NAME OF CORPORATION:	UTH FOOTBALL LEAG	UE INC		
N21000000757				
DOCUMENT NUMBER:	 			
The enclosed Articles of Amendment and fee are sub-	omitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
STEPHEN FARRELL				
	(Name of Contact Persor	1)		
SPRING HILL YOUTH FOOTBALL LEAGUE IN	С			
	(Firm/ Company)			
4375 COPPER HILL DR				
	(Address)			
SPRING HILL, FL 34609				
	(City/ State and Zip Cod	e)	-	
stevefarrell1013@gmail.com				
E-mail address: (to be use	ed for future annual report	notification	n)	
For further information concerning this matter, pleas	se call:			
STEPHEN FARRELL	35 at		587-1479	
(Name of Contact Perso	n) (Ar	ea Code)	(Daytime Telephone N	umber)
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certif Certif	0 Filing Fee Jeate of Status Jed Copy Jed Copy is Jesed)	
Mailing Address Amendment Section		Address Iment Sect	ion	
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Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

SPRING HILL YOUTH FOOTBALL LEAGUE INC 2021 MAR 16 AM 8: 00 (Name of Corporation as currently filed with the Florida Dept. of State) N21000000757 (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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: N/A Name of New Registered Agent: (Florida street address) New Registered Office Address: __, Florida _ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: Thereby 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		<u>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	STEPHEN FARRELL	4375 COPPER HILL DR SPRING HILL, FL 34609
Remove 2) Change Add	V	ERICA FARRELL	4375 COPPER HILL DR SPRING HILL , FL 34609
Remove Change Add Remove	<u>TS</u>	KIMBERLY BERTON	15455 SAGO DR BROOKSVILLE, FL 34604
4) Change Add			
Remove 5)Change Add Remove			
6) Change Add			
E. If amending or additional sh		rticles, enter change(s) here: (Be specific)	
N/A			
			

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The date of each amendment date this document was signed.	(s) adoption:	3/8/2021					_, if other than the
Effective date <u>if applicable</u> :	3/8/2021) more than 90	done attender	andmare 61	lata)	- <u>-</u>	
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<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

	oard of directors. 3-9-3(
Dated	
Signatu	e factor
-	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	STEPHEN FARRELL
	(Typed or printed name of person signing)