N2100000394Z

(Requestor's Name)
(Address)
(/ toursos)
(Address)
(City/State/Zip/Phone #)
(0.1).
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Linky Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600371727766

08/16/21--01035--022 **35.00

2021 AUG 16 AH 7: 56
SECRED Y OF STATE
TALLAHASSEE PA

A-Butler

COVER LETTER

TO: Amendment Section Division of Corporations

Naples Knights So NAME OF CORPORATION:	ftball, Inc.		
N21000003942			
DOCUMENT NUMBER:		<u>. </u>	
The enclosed Articles of Amendment and fee are su	ibmitted for filing.		
Please return all correspondence concerning this ma	ntter to the following:		
Christine Y. Matulay			
	(Name of Contact Pe	rson)	
Naples Knights Softball, Inc.			
	(Firm/ Company)	
10052 Boca Circle			
	(Address)		<u> </u>
Naples, FL 34109			
	(City/ State and Zip (Code)	
admin@naplesknightssoftball.com			
E-mail address: (io be u	sed for future annual rep	ort notification)
For further information concerning this matter, plea	ase call:		
Christine Y. Matulay	at	239	285-8856
(Name of Contact Pers		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida	Department of :	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of State	& □\$43.75 Filing Fee is Certified Copy (Additional copy in enclosed)	Certifi s Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section		reet Address mendment Secti	on
Attendment Section		vision of Corne	

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

Naples Knights Softball, Inc.

Name of Corporation as currently filed with the Fl	orida Dept. of State)	2021 AUS 16 AM 7:5
N21000003942		3700 mm / HM /: 5
(Document	Number of Corporation (if known)	TACE ALL SOE'S TAT
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit C	Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
N/A		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the c	abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	N/A :	
Principal office address MUST BE A STREET ADD		
	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	X) N/A	
	N/A	
	N/A	
D. If amending the registered agent and/or register		e name of the
new registered agent and/or the new registered	•	
Name of New Registered Agent:	<u> </u>	·····
N/	'A	
	(Florida street	address)
New Registered Office Address:		
N/	'A	, Florida N/A
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg Thereby accept the appointment as registered agent.		ations of the position.
	Signature of New Registered Agei	

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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change Add	D	_	David E. Matulay	10052 Boca Circle Naples, FL 34109
Remove				
2) Change Add		_		
Remove 3) Remove Add Remove		-		
4) Change Add		_		
Remove				
5) Change Add		_		
Remove				
6) Change Add		-		
Remove				
E. If amending or additional sheet			icles, enter change(s) here: (Be specific)	
				
				

The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:
Note: 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.

Dated	08/13/2021
Signature	(I lim s. I ham)
<i>-</i>	(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)
	Christine Y. Matulay
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing) Director

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

•