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JUN 22 2021

COVER LETTER

TO: Amendment Section Division of Corporations

Wycliffe Stiffs Stickball League, Inc. NAME OF CORPORATION: __ N21000004463 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Arthur Spector (Name of Contact Person) Wycliffe Stiffs Stickball League, Inc. (Firm/ Company) c/o Philip Strassler, 10718 Northgreen Drive (Address) Wellington, FL 33-449 (City/ State and Zip Code) ruhtrarotceps@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 561 660-1973 Arthur Spector (Daytime Telephone Number) (Area Code) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State:

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enclosed)

(Additional copy is

Mailing Address

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

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Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

□\$52.50 Filing Fee

Enclosed)

Certificate of Status Certified Copy

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Articles of Amendment to Articles of Incorporation of

Wycliffe Stiffs Stickball League, Inc.	01	, ,
ame of Corporation as currently filed with the Flor	rida Dant of Stata)	i: 12
21(XXXXX)4463	iua Dept. of State)	
(Document N	Number of Corporation (if kn	own)
rsuant to the provisions of section 617.1006, Florida Stendment(s) to its Articles of Incorporation:	statutes, this Florida Not For	Profit Corporation adopts the following
If amending name, enter the new name of the corp	poration:	
		The new
ome must he distinguishable and contain the word "cor Company" or "Co." may not be used in the name.	poration" or "incorporated"	" or the abbreviation "Corp." or "Inc."
Enter new principal office address, if applicable:		
incipal office address <u>MUST BE A STREET ADDR</u>	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered	d office address in Florida	ontor the name of the
new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flo	rida street address)
New Registered Office Address.		
	(City)	Florida (Zip Code)
		(11) Code)
ew Registered Agent's Signature, if changing Regist tereby accept the appointment as registered agent. I a		he obligations of the position.
and the state of t	,	
	Signature of New Register	red 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	PD	Arthur Spector	4125 Manchester lake Dr. Wellington, FL 33449
2) Change X Add	PD	Allen Lebowitz	4538 Hazleton Lane Wellington, FL 33449
Remove 3) Change X Add Remove	PD	Harry Klaff	4208 Imperial Club Lane Wellington, FL 33449
4) Change Add	S	Philip Strassler	Wellington, FL 33449
Remove 5) Change	T	Lester Green	10138 Dover Carriage Lane Wellington, FL 33449
6) Change Add			
E. If amending or addin (attach additional shee		nal Articles, enter change(s) here: ssary). (Be specific)	

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	M . 7 2021		
he date of each amendment(s) adoption: ne this document was signed.	May 6, 2021		, if other than t
ffective date <u>if applicable</u> :	more than 90 days after amenda		

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.

	May 6, 2021
Dated	
Signature	Mathin Spector
	(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)
	Arthur Spector
	(Typed or printed name of person signing)
	Incorporator, Director, Co-President