N21000007474

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

| TO: | Amendment Section |
|-----|--------------------------|
| | Division of Corporations |

| NAME OF CORPORAT | Brandon Jax Booster | s, Inc. | | |
|------------------------------|---|---|------------------|---|
| P.O.C.I. Company | N21000007474 | | | |
| DOCUMENT NUMBER | <u> </u> | | | |
| The enclosed Articles of A | mendment and fee are subn | nitted for filing. | | |
| Please return all correspond | dence concerning this matte | r to the following: | | |
| | | Kat McKenna | | |
| | | (Name of Contact Pe | erson) | |
| | | RENOSI, Inc. | | |
| | | (Firm/ Company | /) | |
| | 13506 Sum | merport Village Pkw | ry #1506 | |
| | | (Address) | | |
| | Wi | ndermere, FL 34786 | | |
| | | (City/ State and Zip (| Code) | |
| | srs.s | state@myrenosi.com | ı | |
| | E-mail address: (to be used | for future annual rep | ort notification | 1) |
| For further information con | cerning this matter, please of | call: | | |
| Kat McKenna | | at | 407 | 347-0063 |
| | (Name of Contact Person) | | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the | following amount made pay | able to the Florida I | Department of | State: |
| ■ \$35 Filing Fee | S43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee Certified Copy (Additional copy is enclosed) | Certif Certif | O Filing Fee icate of Status ied Copy iional Copy is |

Mailing Address

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

Enclosed)

Articles of Amendment to Articles of Incorporation

of

| I | Brandon Jax Boosters, Inc. | REA JUIT |
|---|---|-------------------|
| (Name of Corporation | n as currently filed with the Florida Dept. of State) | = = |
| | N21000007474 |); |
| (Docu | ment Number of Corporation (if known) | ;T. == |
| Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation: | orida Statutes, this Florida Not For Profit Corporation a | -1 <u>=</u> |
| A. If amending name, enter the new name of th | e corporation: | Ψ, Ι |
| Jax Boosters, Inc. | | -71 |
| name must be distinguishable and contain the word "Company" or "Co." may not be used in the name | d "corporation" or "incorporated" or the abbreviation <u>ne</u> . | "Corp." or "Inc." |
| B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A | | <u> </u> |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or regis | BOX) stered office address in Florida, enter the name of the | |
| new registered agent and/or the new register | | • |
| Name of New Registered Agent: | Kayla Murphy | |
| | 9758 Redbird Creek Dr S Jacksonville, FL 32221 | |
| (Florida street address) New Registered Office Address: | | |
| | , Florida | |
| | (City) (Zip C | Tode) |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen | Registered Agent: at. I am familiar with and accept the obligations of the property with Odoo Sign Kayla Musp | osition. |
| _ | 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 D Y Mike Jo SV Sally S | ones | |
|----------------------------------|--|---------------|------------------------|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) X Change | þ | Kayla Murphy | 6334 Philips Hwy |
| Add | | | Jacksonville, FL 32216 |
| Remove | | | |
| 2) X Change | VP | Narva Dunlap | 6334 Philips Hwy |
| Add | | | Jacksonville, FL 32216 |
| Remove | | | |
| 3) X Change | <u>T</u> | Christan Dial | 6334 Philips Hwy |
| Add | | | Jacksonville, FL 32216 |
| Remove | | | - |
| 4) X Change | S | Kyria Hoskie | 6334 Philips Hwy |
| Add | | | Jacksonville, FL 32216 |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |

| | e date of each amendment(s) adoption: | if other than the |
|------|--|-------------------|
| Effe | ective date if applicable: | |
| | (no more than 90 days after amendment file date) | |
| | e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records. | listed as the |
| Add | 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. | |
| | 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 5/20/2024 | |
| | Signature Kayla Murphy | |
| | (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) | |
| | Kayla Murphy | |
| | (Typed or printed name of person signing) | |
| | Booster President | |
| | (Title of person signing) | |

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