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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: KNOCKAROUT SOCIETY, INC.
DOCUMENT NUMBER: N21000011069
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHAPLES T. DOWDY II (Name of Contact Person)
(Name of Contact Person)
KNOCKAGOUT SOCIETY, INC.
57359 LANGLEY CIPCLE
(Address)
PENSACOLA, FL 37504 (City/ State and Zip Code)
(City/ State and Zip Code)
SOCIETY OF KNOCKABOUT. OR G
For further information concerning this matter, please call:
CHAPLES POWDY at 350 - 737 - 14:75 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incorporation
(Name of Corporation as currently filed with the Florida Dept. of State) (Name of Corporation as currently filed with the Florida Dept. of State)
KNOCKADOUT SOCIETY INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
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.
B. Enter new principal office address, if applicable:
(Principal office address <u>MUST BE A STREET ADDRESS</u>)
C. Enter new mailing address, if applicable: (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:
Name of New Registered Agent: CHAPLES T. DOWNY II 5759 LANGLEY CIRCLE
SASA LANGUEY MECLE
New Registered Office Address:
PENSACULA Florida 37501
$\frac{\text{(City)}}{\text{(City)}} \text{, Florida} \frac{\text{(Zip Code)}}{\text{(Zip Code)}}$
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 Agend of 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 St	ones .	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>P</u>	DYLAN L. PRICE	GASA LANGLEY CIR.
Remove 2) Change Add	<u> </u>		3775 SUMMER OR FENSALOGIA, FL 3735 DY
Remove Change Add	PST	CHAPLES T. DOWNER	9759 LANGLEY CIR. PENSACULA FL 32509
Remove 4) Change Add	1/1	FRANK M. PEREZ	7011. N. SPRING ST PONS+COLA, FL 32501
Remove 5) Change Add	<u>/\\</u>	AMAHLIA HENSEL	FENSALOLA, FL 3250
Remove 6) Change Add	<u> </u>	TAYLOR WYROSDICK	FUNSAGRA, FL 32501
E. If amending or addin (attach additional shee		<u>cles, enter change(s) here</u> : (Be specific)	

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	 .	
The date of each amendment(s) adoption:	, if other than t	he
date this document was signed.		
Effective date if applicable:		
(n	10 more than 90 days after amendment file date)	_
Note: If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not be listed as the at of State's records.	
Adoption of Amendment(s) ((CHECK ONE)	
The amendment(s) was/were adopted b was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

Dated	10/9/23
Signature	//15//
(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)
	CHAPLES T. DONNDY 21
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)