

N21 0000 11323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

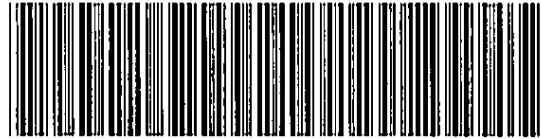
(Business Entity Name)

(Document Number)

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T. LEMIEUX
DEC 17 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Space Coast Youth Hockey Booster, Inc.

DOCUMENT NUMBER: N21000011323

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Judith Straub

(Name of Contact Person)

Space Coast Youth Hockey Booster, Inc.

(Firm/ Company)

1212 Magnolia Drive, ~~Tallahassee, FL~~ (B)

(Address)

Indialantic, FL 32903

(City/ State and Zip Code)

straub.dani@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Judith Straub

(Name of Contact Person)

at

(321) 693-5732

(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 & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address

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

Street Address

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2021

JUDITH STRAUB
1212 MAGNOLIA DR
INDIALANTIC, FL 32903

SUBJECT: SPACE COAST YOUTH HOCKEY BOOSTER INC.
Ref. Number: N21000011323

We have received your document for SPACE COAST YOUTH HOCKEY BOOSTER INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please have a officer or director sign the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 721A00028764

Articles of Amendment
to
Articles of Incorporation
of

Space Coast Youth Hockey Booster, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

NZ100011323

(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:

_____ *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 **MUST BE A STREET ADDRESS**)

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:

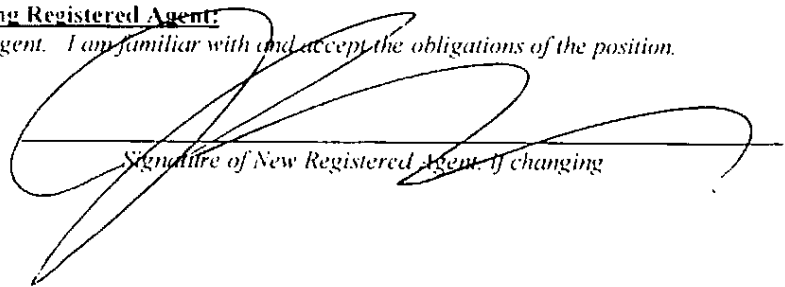
Name of New Registered Agent: Jennifer Baum

1479 Tipperary Drive
(Florida street address)

New Registered Office Address:
Melbourne, Florida 32940
(City) (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 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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|---|--------------|-----------------------|---|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add | <u>✓</u> | <u>Jennifer Braun</u> | <u>1479 Tipperary Drive</u> <u>Melbourne, FL 32940</u> |
| <input checked="" type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add | <u>✓</u> | <u>Jennifer Baum</u> | <u>1479 Tipperary Drive</u> <u>Melbourne, FL 32940</u> |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| 4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |

F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

- 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 _____

Signature _____
(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)

12/3/21 _____ (Ty Mrs. Judith Strub _____
(By a director, president or off (Typed or printed name of person signing)
Judith Strub _____
(By a director, president or off _____
President _____
(Title of person signing)