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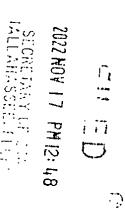
(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations Fernandina Beach High School Lacrosse NAME OF CORPORATION: N21000011649 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Robert Allen (Name of Contact Person) (Firm/ Company) 818 San Fernando St (Address) Fernandina Beach, FL 32034 (City/ State and Zlp Code) rjallen99@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 843 263-0761 Robert Allen (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 Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed) Street Address Malling Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Fernandina Beach High School Lacrosse Club

(Name of Corporation as currently filed with the Florida D	<u>Jept. of State</u>)
N21000011649	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
Fernandina Reach Lacrosse Booster Club	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	659 Gaines Lane
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Fernandina Beach, FL 32034
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	659 Gaines Lane
(1/2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Fernandina Beach, FL 32034
D. If amending the registered agent and/or registered office	
new registered agent and/or the new registered office a	adress:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
- , ,	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	
Si	ignature of New Registered Agent, if changing

P = President; V = Vice F	rector title by the f President; T= Trea = Chief Financial (Officer. If an officer/director	·	ve; C = Chairman or Clerk; CEO = Chief one title, list the first letter of each office
	ves the corporation	n, Sally Smith is named the $ hlapp$		F and Mike Jones is listed as the V. There is uld be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	PT John De V Mike Jo SV Sally Sr	ones		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change Add	<u>P</u>	Robert Allen		818 San Fernando St Fernandina Beach, FL 32034
X Remove 2) Change Add	VP	Carl Bazarian		95048 Mackinas Cir Fernandina Beach, FL 32034
X Remove 3) Change Add X Remove	<u>T</u>	William Mooney		559 Gaines Lane Fernandina Beach, FL 32034
4) Change X Add	<u>P</u>	William Mooney		659 Gaines Lane Fernandina Beach, FL 32034
Remove 5) Change Add	<u>T</u>	Sara Fargo		2785 Turtle Shores Dr Fernandina Beach, FL 32034
Remove 6) Change	<u>C</u>	Robert Allen		818 San Fernando St Fernandina Beach, FL 32034
E. If amending or additional sheet		cles, enter change(s) here: (Be specific)	-	

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:

	· · · · · · · · · · · · · · · · · · ·
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after am	enament jue date)
Note: If the date inserted in this block does not meet the applicable statut document's effective date on the Department of State's records.	dry filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number was/were sufficient for approval.	of votes cast for the amendment(s)

)	There are no member adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.
	Dated _	15 NOV 22
	Signature _	Nebet 1 all
	`t	by the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or ther court appointed fiduciary by that fiduciary)
		ROBERT J ALLEN
		(Typed or printed name of person signing)
		CHHIRMAN
		(Title of person signing)

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