## N21000013378

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SECRETARY OF CORPORATIONS

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION          | 10K Alumni Associ                           | ation, Inc.  |                     |  |
|------------------------------|---|--|---------------------|--|
|                              | N21000013378                                |  |                     |  |
| DOCUMENT NUMBER:             |   |  |                     |  |
| The enclosed Articles of An  | nendment and fee are sub                    | omitted for filing.  |                     |  |
| Please return all correspond | ence concerning this mat                    | ter to the following:  |                     |  |
| Jordan Moore                 |   |  |                     |  |
|                              | <del></del>                                 | (Name of Contact Pe  | rson)               |  |
| 10K Alumni Association       |   |  |                     |  |
|                              |   | (Firm/ Company   | ·)                  |  |
| 201 E Kennedy Blvd Ste 95    | 60  |  |                     |  |
|                              |   | (Address)  |                     |  |
| Tampa, FL 33602              |   |  |                     |  |
|                              |   | (City/ State and Zip C   | Code)               | -  |
| jordan@premierplayers.com    | n   |  |                     |  |
|                              | -mail address: (to be use                   | d for future annual rep  | ort notification    | n)   |
| For further information con- | cerning this matter, pleas                  | e call:  |                     |  |
| Jordan Moore                 |   | at   | 813                 | 833-3495   |
|                              | (Name of Contact Person                     |  |                     | (Daytime Telephone Number)   |
| Enclosed is a check for the  | following amount made p                     | payable to the Florida I   | Department of       | State:   |
| ■ \$35 Filing Fee            | ☐\$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee of Certified Copy (Additional copy is enclosed) | Certif<br>s Certif  | 0 Filing Fee<br>ficate of Status<br>fied Copy<br>tional Copy is<br>osed) |
| Mailing /                    | <u>\ddress</u>                              | <u>Str</u>   | ee <u>t Address</u> |  |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

10K Alumni Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N21000013378 (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: 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: \_ (Florida street address) New Registered Office Address: \_\_\_\_, Florida \_\_\_\_ (Zip Code) (City) 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: X_Change X_Remove X_Add                   | PT         John Do           V         Mike Jo           SV         Sally Sn | nes .  |  |
|--|--|--|--|
| Type of Action (Check One)                         | <u>Title</u>   | Name   | Address  |
| 1) Change Add                                      | <u>VP</u>  | Carnell Moore                                | Vital Guidance<br>201 E Kennedv Blvd. Ste 950                |
| × Remove   |  |  | Tampa, FL 33602  |
| 2) Change Add                                      | <u>S</u>   | Jordan A Moore                               | Vital Guidance 201 E Kennedy Blvd. Ste 950                   |
| * Remove 3) Change  X Add  Remove                  | VP   | Chris Pacetti                                | Tampa, FL 33602  201 E Kennedy Blvd Ste 950  Tampa, FL 33602 |
| 4) Change Add                                      | <u>T</u>   | Dr. Kathy Garrett                            | 201 E Kennedy Blvd Ste 950<br>Tampa, FL 33602                |
| Remove  5) Change                                  |  |  |  |
| 6) Change Add                                      |  |  |  |
| E. If amending or addit<br>(attach additional shee |  | cles, enter change(s) here:<br>(Be specific) |  |
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| The date of each amendment                                       | 08/04/2022<br>t(s) adoption:   | , if other than th                 |
| date this document was signed                                    | 1  |                                    |
| The same transfer of the same same same same same same same sam  |  |                                    |
| Effective date if applicable:                                    | 08/04/22   |                                    |
|  | (no more than 90 days after amendment file date)   |                                    |
|  |  |                                    |
| Note: If the date inserted in the document's effective date on t | his block does not meet the applicable statutory filing requirements, the Department of State's records. | his date will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )   |                                    |
| <b>—</b>   |  |                                    |
| The amendment(s) was/was/were sufficient for a                   | vere adopted by the members and the number of votes cast for the am pproval.                             | nenament(s)                        |

| Dated   | 08/04/2022   |
|---------|--|
| Signatu |  |
|         | (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) |
|         | Carnell Moore  |
|         | (Typed or printed name of person signing)  |
|         | Vice President   |
|         | (Title of person signing)  |

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.