# N22 000 000 540

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### COVER LETTER

TO: Amendment Section **Division of Corporations** 

:

NAME OF CORPORATION: Pressure House Academy Youth Football and Cheer I
DOCUMENT NUMBER: N2200000 540
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bernard F. Gorden, II. (Name of Contact Person)
(Firm/ Company)
1109 6th St. East
(Address)
Bradenton, Florida 39208 (City/State and Zip Code)
E-roal address: (to be used for future annual report politication)
For further information concerning this matter, please call:
Bernard Goden at 941 718 - 862 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Status S43.75 Filing Fee Status S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address

# Mailing Address

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

·	Articles of incorporation	
Pressure House Acc	deny Youth	Forthall and cheer In
(Name of Corporation as currently filed with the FI	orida Deptl of State)	~
No. 2	1000000 (	240
(Document	t Number of Corporation (if kr	nown)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the contain the word "company" or "Co." may not be used in the name.	91es Youth F	WHOLL DID Cheer In The new To or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
Trincipal office address <u>Most BE TOTALETTE</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)  D. If amending the registered agent and/or register		enter the name of the
new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:		
<u>_</u>		
New Registered Office Address:	(Fle	orida street address)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		the obligations of the position.
	Signature of New Registo	ered 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 I V Mike SV Sally	Jones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)ChangeAdd	$\checkmark$	Christopher Jackson	1318 Kolten Born Rd North Port, FL 34288
Remove  2) Change Add			
Remove 3 ) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		rticles, enter change(s) here: (Be specific)	
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12/2/2011	
The date of each amendment(s) adoption: \( \lambda \sum \sum \lambda \	_, if other than the
date this document was signed.	
Effective date if applicable: 12/5/2024	
The date of each amendment(s) adoption: 12/5/2024 date this document was signed.  Effective date if applicable: 12/5/2024  (no more than 90 days after amendment file date)	
	1. 1. 11
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	ne listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ 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 1215   2024
Signature Pornost Coom, I
(By the 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)
Bernard F. Gowen, II (Typed or printed name of person signing)
President
(Title of person signing)