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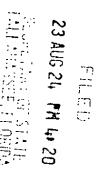
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: KUFF ATHLE 1105 / 11115
DOCUMENT NUMBER: <u>N22000070</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sharika Smith-Ball
(Name of Contact Person)
RUFF ATHLETICS MINISTRY INC. (Firm/Company)
3916 Applegate Cir
Brandon, FL 33511 (City/ State and Zip Code)
ruff athletics ministry @ Jahoo. Com E-mail address: (to be used for future amual report notification)
For further information concerning this matter, please call:
Sharika Snith-Ball a(270) 214 DO65 (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:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address Street 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 Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)

23AUB 24 (17) 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: (Muiling 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 (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.

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change Add			
Remove			
2) Change Add			<u> </u>
Remove Change Add Remove			
4) Change Add		- /	
Remove			
5) Change Add	/		
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		onal Articles, enter change(s) here: essary). (Be specific)	

					
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	date of each amendment(s) adopt	ion:			if other than the
date	this document was signed.	^///	1		
Eff	ective date <u>if applicable</u> :	(no more than 90 days	after amendment file	dawi	
	e: If the date inserted in this block dument's effective date on the Depart	loes not meet the applica			be listed as the
	option of Amendment(s)	(<u>CHECK ONE</u>)			
	The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and t	he number of votes ca	st for the amendment(s)	

adopted by the board of directors.
Dated 8/33/3033
Signature Dala Sugal Ball
(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)
Sharika Smith - Ball (Typed or printed name of person signing)
CED
(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were