NZZCCCON025

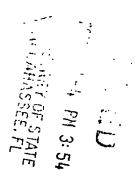
| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |

Office Use Only



100430786401

98/04/24--01017--002 **35.00



54041 cy

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF COE | | letic Booster Club | | | |
|--------------------|--|---|---|---------------|--------------------|
| DOCUMENT N | N22000011025 UMBER: | | · | | |
| The enclosed Art | icles of Amendment and fee are su | bmitted for filing. | | | |
| Please return all | correspondence concerning this ma | tter to the following: | | | |
| | Kristie A. Scott, Esq. | | | | |
| | Light Path Law, P.A. | Name of Contact Person | | | |
| | 2069 First Street, Suite 100 | Firm/ Company | | | |
| | Fort Myers FL 33901 | Address | | 1387 | 7143 144 144 |
| | kscott@hghtpathlaw.com | City/ State and Zip Code | | HARY O | . ۔ توس |
| For further infori | E-mail address: (to be us mation concerning this matter, plea | sed for future annual report i se call: | notification) | ESTATE | PH 3: 54 |
| Kristie A. Scott, | Esq. | 239 at (| 689-8481 | | |
| N | ame of Contact Person | Area Cod | e & Daytime Telephone | Number | |
| Enclosed is a che | ck for the following amount made | payable to the Florida Depa | rtment of State: | | |
| S35 Filing F | ce ☐\$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 | Amendi Division The Co 2415 N | Address ment Section n of Corporations entre of Tallahassec l. Monroe Street, Suite ssee, FL 32303 | e 8 10 | |

Articles of Amendment Articles of Incorporation of

to

Cypress Lake Athletic Booster Club, Inc.

| | ed with the Florida Dept. of St | <u>utt</u>) | | |
|--|--|----------------------|--------------------|-------------------|
| (Document Number of Co | rporation (if known) | | | |
| arsuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> Articles of Incorporation: | ida Profit Corporation adopts th | ne follow | ing am | endmen |
| . If amending name, enter the new name of the corporation: anthers Athletic Booster Club, Inc. | | | The | e new |
| me must be distinguishable and contain the word "corporation," "comp nc.," or Co.," or the designation "Corp," "Inc," or "Co". A pr chartered," "professional association," or the abbreviation "P.A." | oany," or "incorporated" or the offessional corporation name m | abbrevia ust cont | tion "(ain the | lorp.," 2 word |
| Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) | | - | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | <u>;</u> | 1 yelf 22 2 | |
| | | SSVHF. | | • • |
| . If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: | in Florida, enter the name of t | EF. STATE | 11 3: 54 | |
| Name of New Registered Agent | | | | |
| | 7,1 | | | |
| New Registered Office Address: | , Flori | 33901 da | | |
| (Cit | 9 | (Z) | p Code, |) |

Check if applicable

The amendment(s) is/are being filed pursuant to s 607.0120 (11) (e), F.S.

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 | <u>PT</u> | John Doe | |
|----------------------|-----------------|--------------|---------------------|
| X Remove | \underline{V} | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| (Check One) X | T | DEAN JOHNSON | 6750 Panther Lane |
| 1) Change | | | Fort Myers FL 33919 |
| Add | | | <u> </u> |
| Remove | | | <u> </u> |
| 2) Change | | | y 4f |
| Add | | | 75 1 |
| Remove 3) Change | | | |
| Add | | | 3: 54 E. F. |
| Remove | | | m + |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | <u> </u> |
| Add | | | |
| Remove | | | |

| f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific) | | | |
|---|-------------------------------|-----------------|---|
| | | | |
| | | | |
| | ••• | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | - | | |
| | | | |
| | · yo | » ; | |
| | | | |
| | * | | |
| | <u>ئەمنۇ</u> <u>- ئىنى</u> | - | |
| | 35-4 | 1 | _ |
| | 77 (T) | 3 | |
| | <u> </u> | -ن ب | į |
| | ₽₹ | 2 <u>T</u> | |
| | , m | + | |
| f an amendment provides for an exchange, reclassification, or cancellation of issued shares, | | | |
| provisions for implementing the amendment if not contained in the amendment itself: | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | |
| | | | |
| | | | |
| | | | |
| | | • | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| | | :1 | f other th | an the |
|---|---|-------------|------------|---------------|
| The date of each amendment(s) adoption date this document was signed. | tion: | | | |
| Effective date if applicable: | (no more than 90 days after amendment file date) | | | |
| Note: If the date inserted in this block document's effective date on the Depar | k does not meet the applicable statutory filing requirements, this datement of State's records. | e will not | he listed | as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | | | |
| ■ The amendment(s) was/were adopte action was not required. | d by the incorporators, or board of directors without shareholder actio | n and shar | eholder | |
| ☐ The amendment(s) was/were adopted by the shareholders was/were suffice | d by the shareholders. The number of votes east for the amendment(s ient for approval. |) | | |
| ☐ The amendment(s) was/were approvemust be separately provided for each | ed by the shareholders through voting groups. The following statement the statement of the | nt | | |
| "The number of votes east for | the amendment(s) was/were sufficient for approval | F " | <i>*</i> | |
| by | (voting group) | | | |
| Dated | V. Com | SO OF STATE | PM 3: 54 | grave Band |
| selected, by | or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary) | • | | |
| | (Typed or printed name of person signing) | | | |
| | | | | |
| <u> Pr</u> | es.dent | | | |
| | (Title of person signing) | | | |