

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

Office Use Only



300418523823

777 1. 2 - 6. FM 12: 25



## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 920th LRS Booster Club Corp DOCUMENT NUMBER: N 2300006131 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ryan Matthew Des 18ts
(Name of Contact Person) 920th LRS Broster Club Corp (Firm/Company) 734 Space 1.14 Are Bldp 313, Patrice SFB, FL 32 Policit SFB, FL 32925
(City/State and Zin Code) 2nthon 16e111ccio 6gm2il. com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 263.3241

(Area Code) (Daytime Telephone Number) Anthony Bellvice,0
(Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee ☑ \$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) 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 of

Name of Corporation as currently filed with the Florid	Corp	
N23000006131	* nent of state)	
	nber of Corporation (if kno	
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	- ·	•
A. If amending name, enter the new name of the corpor	ation:	
<b>1//</b> A		
name must be distinguishable and contain the word "corport "Company" or "Co," may not be used in the name.	ration" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u>	A\\\\\	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
. If amending the registered agent and/or registered off new registered agent and/or the new registered office	<u>agaress:</u>	
Name of New Registered Agent:	Inthony Belluce N/A	210
New Registered Office Address:		la mana - 11 - 1
<del></del>	N/A (City)	Florida NA (Zip Code)
ew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept the	- ,
$\frac{An}{S_i}$	thony Bellucci ignature 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		Doe : Jones · Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>ρ</u>	Ryan Desilets	734 Spacelitt Ave BIL, 313 Patrick SFB FL 32925
X Remove  2) Change Add	<u>ρ</u>	Anthony Belluccio	Same as above
Remove 3) Change Add Remove	M&v ∧	Kerry Lastra	Same as above
4) Change Add		Xaria Davis	Same as above
Remove  5) Change  Add	_5_	Julia francis	Same as above =
<ul> <li></li></ul>	5	Nam. Zunga	Same as above N
E. If amending or a	dding additional sheets, if necessar	Articles, enter change(s) here: y). (Be specific)	

	•	17
		20
		, O,
•		
	October 15th	
	1 15t 2023	, if other than the
The date of each amendment(s) ad date this document was signed.	•	
Effective date if applicable:	November 15+ 2023  (no more than 90 days after amendment file date)	
	(no more than 90 days after amenament) in ani-	this date will not be listed as the
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, partment of State's records.	uns date was not de asset
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the areal.	mendment(s)

Dated October 24th 2023
Signature / m
(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)
have not been selected, by an incorporator - if in the hands of a receiver, trustee, or

(Title of person signing)

6. 17 to 1 - 9 - 10 15: 26