N23000007140

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COVER LETTER

TO: Amendment Section Division of Corporations TB Crunch Girls Hockey Inc NAME OF CORPORATION: N23000007140 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Amanda Bennett (Name of Contact Person) (Firm/ Company) 9014 Sienna Moss Ln (Address) Riverview, FL 33578 (City/ State and Zip Code) abennett2682@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call; 480-4825 Amanda Bennett (Daytime Telephone Number) (Area Code) (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 Certified Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street Address

(Additional copy is

enclosed)

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Certified Copy

Enclosed)

(Additional Copy is

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2023 OCT 12 PM 4: 10 TB Crunch Girls Hockey Inc (Name of Corporation as currently filed with the Florida Dept. of State) N23000007140 (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: Girls Hockey Association of Tampa Inc. 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. N/A 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) 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 Je SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add		<u>N/A</u>	
Remove			
2) Change Add		N/A	
Remove 3) Change Add Remove		<u>N/A</u>	
4) Change Add		<u>N/A</u>	
Remove			
5) Change Add		<u>N/A</u>	
Remove			
6) Change Add		<u>N/A</u>	
Remove			
(attach additional she	ing additional Ar rais, if necessary).	ticles, enter change(s) here: (Be specific)	
<u>N/A</u>			

	·
The date of each amendment(s) ad date this document was signed.	option:
09/20	0/23
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo- document's effective date on the De	ck does not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) il.

	09/20/23
Dated	
C:trans	(Butte
Signaturo	(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)
	Amanda Bennett
	(Typed or printed name of person signing)

(Title of person signing)

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

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