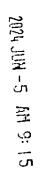
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Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Association Des Anciens Du Foball Limben Inc.	
DOCUMENT NUMBER: 99-2961782	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Bidry Dorsain VII (Name of Contact Person)	
Association 725 Anciens Du Fooball Limber Inc. (Firm/Company)	
1268 NE 146th Street (Address)	
Miami, Florida 33161 (City/ State and Zip Code)	
E-mail address: (to be used for future Innual report notification)	
For further information concerning this matter, please call:	
Bidry Dorsainvil 1154) 244-9371 =	9
(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 & S43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)	
Mailing Address Street Address	

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

Street Address
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

ASSOCIATION DES AncienS !  (Name of Corporation as currently filed with the Florida De	Du toball Limber Inc.
QQ 20	pt. or state)
(Decument Number	of Corporation (if known)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
Association Des Anciers Du Footname must be distinguishable and contain the word "corporation" (Company" or "Co." may not be used in the name.	thall Limbern Inc. The new on" or "incorporated" or the abbreviation "Corp." or "Inc."
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)	2021 J
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent:	16
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam.	Agent: iliar with and accept the obligations of the position.
Sign	nature 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>	Name	<u>Addres</u> s
1) Change Add	<del></del>		
Remove			
2) Change Add			2024 JUN
Remove  3 ) Remove  Add Remove			<u>5</u> 7
4) Change Add	<del></del>		<u> </u>
Remove  5) Change Add			
Remove 6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Airs, if necessary)	rticles, enter change(s) here: . (Be specific)	
-			
	<u> </u>		

2024
1,000
<u> </u>
N4 10 2001i
The date of each amendment(s) adoption: May 10, 2004, if other than the date this document was signed.
date this document was signed.
Effective date if applicable: May 29, 2024
Effective date if applicable: 17 au 20 days after amendment file date)
(410 more than 30 days after amenament file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) weekwere adopted by the most and the southern force of the southern for
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Signature

(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)

(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

adopted by the board of directors.