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C. LEWIS

DEC 1 3 2013 EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Casselbe	rry	Little	League,	Inc.
DOCUMENT NUMBER: N25	727			
The enclosed Articles of Amendment and fee are subm	nitted for fili	ng.		
Please return all correspondence concerning this matte	r to the follo	wing:		
Kelly Nocentino (Name of Contact Person)				
Casselberry Little League. Inc. (Firm/Company)				
+36 Ranch Trail (Address)				
	(Add	lress)		
Casselberry F	L 30	2707		
	(City/ State a	nd Zip Code)		
Knocentinoe CFL. RR. Com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Kelly Nocentino	at (407	619-611	6
Kelly Nocentino at 407 bl9-6116 (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:				
\$35 Filing Fee \$\sum \\$43.75 Filing Fee \$\sum \\$43.75 Filing Fee \$\sum \\$Certified Copy				
Mailing Address		Street Add		
Amendment Section Division of Corporations		Amendmer Division of	nt Section Corporations	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

13 DEC -9 PM 2:58

Articles of Amendment

to Articles of Incorporation

(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 corpora	ation:	
N/	A	The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbrevia	tion "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	N/A S)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		of the
Name of New Registered Agent: Kelly 436	Nocentino Ranch Trail (Florida street address)	
New Registered Office Address: Cu 55e l. (City	,	32707 (Zip Code)
New Registered Agent's Signature, if changing Registere	d Agent:	

I hereby accept the appointment as registered agent. A am familiar with and accept the obligations of the position.

Page 1 of 4

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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	5_	Lissette Smith	<u>fo Box 181762</u> <u>Casselberry FL</u> 32718
2) Change Add	T	Jason Aspin Wall	PO BOX 181762 Casselberry FL 32718
Remove 3) Change Add	5	Kim Carr	PO BOX 181762 Casselberry FL 32718
	T	Kelly Nocentino	436 Ranch Trail Casselberry FL 32707
Change Add		Rafael Quinn	Po Box 181762 Casselberry FL 32718
Remove 6) Change Add Remove	- —	•	

. If amending or adding additional Articular (attach additional sheets, if necessary).	cles, enter ch	ange(s) here:			
NA	·				
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	<u> </u>				

date	e date of each amendment(s) ado e this document was signed. ective date <u>if applicable</u> :	ption: 10/13/13 10/13/13 (no more than 90 days after amendment file date)	APPROVED AND FILED , if other than the 13 DEC -9 PM 2:59 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Ada	option of Amendment(s)	(CHECK ONE)	
13 /	The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the	e amendment(s)
	There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment s.	t(s) was/were
	Dated	ees Nocest	
	have not been	an or vice chairman of the board, president or other office selected, by an incorporator – if in the hands of a receive pointed fiduciary by that fiduciary)	er-if directors er, trustee, or
	Kel	ly Nocentina	
	TRE	Typed or printed name of person signing)	
		(Title of person signing)	