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COVER LETTER

TO: Amendment Section Division of Corporations

Winter Park Pop Warner, Inc. NAME OF CORPORATION:
N93000001550 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Amy Powers
(Name of Contact Person)
Florida Youth Athletics, Inc.
(Firm/ Company)
P.O. Box 55
(Address)
Winter Park, Florida 32790
(City/ State and Zip Code)
amy.powers@floridayouthathletics.org
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is cnclosed) Certified Copy (Additional Copy is Enclosed)

Mailing Address

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Winter Park Pop Warner, Inc.			
·	ently filed with the Florida Dept.	of State)	
N93000001550			
(Document Num	ber of Corporation (if known)		
Pursuant to the provisions of section 617,1006, Florida Statu imendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For Profit Co</i>	orporation adopts the fol	lowing
A. If amending name, enter the new name of the corpora	ition:		
Florida Youth Athletics, Inc.		TI	ie new
name must he distinguishable and contain the word "corpor "Company" or "Co." may not he used in the name.	ation" or "incorporated" or the a	bbreviation "Corp." or	'Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>	201 N. New York Ave. Suite 10	00	
	Winter Park, Florida 32789		
		7-7-	19
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 55		¥3#
	Winter Park, Florida 32790		20
			35
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		name of the	_
Name of New Registered Agent:			
	(Florida sweet d	address)	
New Registered Office Address:			
	. Florida		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f	d Agent: amiliar with and accept the obliga	tions of the position.	
	Signature of New Registered Agen	t 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	<u>V</u> <u>Mil</u>	n <u>Doc</u> t <u>e Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PL)	Amos Vizer	P.O. Box 55
X Add			Winter Park, Florida 32790
Remove			
2) Change	PD	Sid Cash	P.O. Box 55
Add			Winter Park, Florida 32790
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

tach additional sheets, if necessary).	(Be specific)
·	
 	

	date of each amendment(s) adoption:	, if other than the
em	ctive date if applicable:	
	(no more than 90 days after amendment file date)	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be unent's effective date on the Department of State's records.	e listed as the
۸da	ption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated November 15, 2019	
	Signature Any Poul (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)	
	Amy Powers	
	(Typed or printed name of person signing)	
	Treasurer	
	(Title of person signing)	