

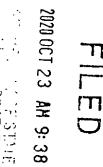
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: PARKLAND S	OCCER CLUB, IN	<u>iC</u>	
NO5000004979			
DOCUMENT NUMBER: N95000004878			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
PETER GADO			
	(Name of Contact Pers	on)	
PARKLAND SOCCER CLUB INC			
	(Firm/ Company)		
4613 N UNIVERSITY DRIVE #284			
	(Address)		
PARKLAND, FL 33067			
	(City/ State and Zip Co	de)	
E-mail address: (to be used	for future annual repor	t notification	n)
For further information concerning this matter, please	call:		
PETER GADO	at	954-592	-5482
(Name of Contact Person	) (/	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made po	ayable to the Florida De	partment of	State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee cate of Status ed Copy is sed)
Mailing Address		et Address ndment Secti	
Amendment Section Division of Corporations		nament Section of Corpo	
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The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

PARKLAND SOCCER CLUB INC (Name of Corporation as currently filed with the Florida I	Dept. of State)		
N95000004878	/		
	er of Corporation (if l	known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not F</i>	For Profit Corporation adopts the	following
A. If amending name, enter the new name of the corporat	ion:		
			_The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporate	ed" or the abbreviation "Corp." o	er "Inc."
B. Enter new principal office address, if applicable:	· ————		
(Principal office address <u>MUST BE A STREET ADDRESS</u>	)		21
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		<u></u>	· 67
C. Enter new mailing address, if applicable:		•	23
(Mailing address MAY BE A POST OFFICE BOX)			
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		771	8
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	<u>ce address in Florid:</u> iddress:	a, enter the name of the	
Name of New Registered Agent:			
		Florida street address)	
New Registered Office Address:	"	rioriua sireei auuress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accep	ot the obligations of the position.	
	ionature of New Regi	stered Avent 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 D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	_DP	Salvatore Lantieri	4613 UNIVERSITY DR, #284 PARKLAND, FL 33067
Remove 2) Change Add	SD	Sal Lantieri	4613 UNIVERSITY DR, #284 PARKLAND, FL 33067
X Remove 3) Add Remove			2020 OC
4) Change Add			123
Remove 5) Change Add			AH 9: 38
Remove 6) Change Add Remove			
		dcles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption date this document was signed.	n: 07/30/2020		, if other than the
Effective data if applicables			
Effective date if applicable:	(no more than 90 days after amendment file date	e)	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing require ent of State's records.	ements, this date will not be	c listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for	or the amendment(s)	

Dated 10/16/2020

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)

PETER GADO

(Typed or printed name of person signing)

TD

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

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