## N9700005673

| (Requestor's  | Name)                |
|---|----------------------|
| (Address)   |                      |
| (Address)   |                      |
| (City/State/Zi  | o/Phone #)           |
| PICK-UP W   | AIT MAIL             |
| (Business En  | tity Name)           |
| (Document N   | umber)               |
| · <del></del>   | tificates of Status  |
| Special Instructions to Filing Office Unital Carry Authority Landelle & | regadent.<br>8/18 ac |
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Office Use Only



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SECRETARY OF STATE

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

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| NAME OF CORPORATION: Florido (RI  | CKET UMPIRE CISS/inc   |
|---|--|
| DOCUMENT NUMBER: NG 97000   | 00 5673  |
| The enclosed Articles of Amendment and fee are submitted  | for filing.  |
| Please return all correspondence concerning this matter to the  | ne following:  |
| ASTA B. (Name of Contact Person)  | PRO/   |
| (Firm/ Company)   |  |
| 410 N.E 172 S   | SIRECT   |
| NORTH Miani Brack (City/ State/ and Zip Code)   |  |
| For further information concerning this matter, please call:  |  |
| ASTOB. GRRO/ at (3) (Name of Contact Person)  | area Code & Daytime Telephone Number)  |
| Enclosed is a check for the following amount:   |  |
| ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$4 | opy Certificate of Status  |
| Amendment Section Division of Corporations P.O. Box 6327  | Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399 |

Articles of Amendment Articles of Incorporation

| ۵.۵    | 9        |     |          |
|--------|----------|-----|----------|
| P.C.   |          |     | <b>.</b> |
| P      | Mary Con | 4 6 | ク        |
| 1NG    | 2. 7.5   | (A) |          |
| State) | ,        | ٠٠, |          |

lorido CRICKET UMPIRE (Name of corporation as currently filed with the Florida Dept. of

N 9700005673
(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:

## NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

| please delite The Following      | ROMES         |
|----------------------------------|---------------|
| Josiya Moxie                     |               |
| persod Bhim                      |               |
| Vincent Hartley                  |               |
| Michael Gould                    |               |
| The New names are                |               |
| ASTa.B. Carrol PRESIE            | leni          |
| William Jordan V. +              |               |
| Maxwillian Do Diah               | •             |
| GROFTON BROTTHWAITE              | 1 /           |
| Phillip Harper ass               |               |
| 410 NE 172 St.                   |               |
| North MiAMibe ach                | FL 33162-3919 |
| * NEW Registered Hae (continued) | Wt:           |
| Asta Blair CArrol                |               |
| 410 NE 172 St.                   |               |

| The date of adoption of the amendment(s) was: 8. 11- 2004  |
|--|
| Effective date if applicable: 8-11-2004 (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s) (CHECK ONE)   |
| The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.           |
| ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.      |
| Signed this day of   |
| have not been selected, by an incorporator- if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) |
| (Typed or printed name of person signing)  |
| PResident (Title of person signing)  |

FILING FEE: \$35