P01000109463

(Re	equestor's Name)	
(Ad	ldress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

guarante de la constantina

NAME OF CORPORATION: SPO DOCUMENT NUMBER: P0100		NATIONAL	INC.	
DOCUMENT NUMBER: 1 0100	70 100 100	•		
The enclosed Articles of Amendment	and fee are submitted fo	r filing.		
Please return all correspondence conce	rning this matter to the	following:		
JOHN DORAK, RTRP				
	Name o	of Contact Person	-	
COMPUKEEPER INC.				
	Fir	m/ Company		
2298 NW BOCA RATON BLVD SUITE 20				
		Address	<u> </u>	
BOCA RA	ATON, FL 334	31		
	City/ St	tate and Zip Code		
DORAKJ@B	ELLSOUTH.N	IET		
	ress: (to be used for futu		otification)	
For further information concerning this	matter, please call:			
JOHN DORAK		at (561	368-7769	
Name of Contact Person	n	Area Code & Daytime Telephone Number		
Enclosed is a check for the following a	mount made payable to	the Florida Depart	ment of State:	
\$35 Filing Fee \$43.75 F. Certificat	e of Status Certif	ied Copy tional copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231		Division Clifton E	ent Section of Corporations	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

SPORTS INTERNATIONAL, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

ent(s) to

P01000109463				**************************************	بې
(Document Number	r of Corporation (if k	nown)		THE	20
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Flo	orida Profit Corp	oration add	opts the following a	ımendı
A. <u>If amending name, enter the new name of the</u> LE PETIT SPORTS INC.	e corporation:	· .		T	he ne
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	orp," "Inc." or "Co	". A profession	' ''incorpor al corporat	ated" or the abbi	reviati ntain t
B. Enter new principal office address, if applica					
(Principal office address <u>MUST BE A STREET A</u>	(DDRESS)	,			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)				
	•				
D. If amending the registered agent and/or regi	stered office address	s in Florida, ent	er the name	e of the	
new registered agent and/or the new register	red office address:				
Name of New Registered Agent		·` 	 		
	(Florida street	address)		•	
New Registered Office Address:		·.	_, Florida		
	(City)			(Zip Code)	
New Registered Agent's Signature, if changing					
I hereby accept the appointment as registered ager	ıt. I am familiar with	h and accept the	obligations	of the position.	
Signatura	f Now Dogistanad Age	nt if abouting			

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:		ty Smun, Sv us un Auu.	
X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add .		,	
Remove			· .
3) Change			
Add			
Remove			
4) Change			
Add			t
Remove		•	
5) Change			
Add			
Remove			
0 0			
6) Change		_	
Add			
Remove			

ttach additional sheets, if necessary)	rticles, enter change(s). (Be specific)		
· · · · · · · · · · · · · · · · · · ·			,
			,
	<u></u>		
	· · · · · · · · · · · · · · · · · · ·	***************************************	
		•	
			•

If an amendment provides for an ex provisions for implementing the an (if not applicable, indicate N/A)	nendment if not conta	n, or cancellation of ined in the amendme	issued shares, nt itself:
		<u> </u>	
:			

The date of each amendment(s) ac	loption: 12/01/2012
Effective date if applicable: 12	/01/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 12/01/	2012
Signature	of tewwo
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	JEAN PHILIPPE FLEURIAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)