## P02000060813

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(Red	questor's Name)	
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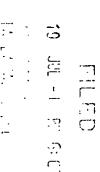
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JUL 12 2019 S. YOUNG



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FINISHLINE PARI	K, INC.			
DOCUMENT NUMB					
The enclosed <i>Articles o</i>	of Amendment and fee are sub	omitted for filing.			
Please return all corres	pondence concerning this matt	ter to the following:			
	STEPHANIE SCHWARZ				
•		Name of Contact Perso	in		
	FINISHLINE PARK, INC.				
•		Firm/ Company			
	217 FENTRESS BLVD.				
•		Address			
	DAYTONA BEACH, FL 321	14			
·		City/ State and Zip Coo	le		
STEP	H@FINISHLINERV.COM				
	E-mail address: (to be use	ed for future annual repor	t notification)		
For further information	concerning this matter, please	e call:			
STEPHANIE SCHWA	ARZ	at (	238-8221		
Name o	f Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made p	ayable to the Florida Dep	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ling Address		Address		
	ndment Section sion of Corporations	Amendment Section			
	Box 6327	Division of Corporations Clifton Building			
	hassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

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THISTIGING FARK. INC					
(Name o	of Corporation as current	ly filed with the Florida Dept. of State	<u>e</u> )		
P02000060813					
·	(Document Number o	of Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this	Florida Profit Corporation adopts the	following a	ımendn	nent(s) to
A. If amending name, enter the new na	ame of the corporation:				
			7	he ne	m
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa  B. Enter new principal office address, (Principal office address MUST BE A S	iation "Corp," "Inc," or ' tion," or the abbreviation ' if applicable:	"Co". A professional corporation nan			
		,		<b>.</b>	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			<u>ڊي</u>	- <u>-</u> - <u>-</u> -	
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			.::	. <u>:</u>	·
D. If amending the registered agent an			: •	ධි	
new registered agent and/or the new	··				
Name of New Registered Agent	STEPHANIE SCHWARZ	<u></u>			
	295 COQUINA AVE,				
	(Florida st	reet address)			
New Registered Office Address:	ORMOND BEACH	, Florida	32174		_
<u> </u>		(City)	(Zip Co	de)	

New Registered Agent's Signature, if changing Registered Agent:

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

Signature of New Registered Agent, 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.

X Change	<u>PT</u> <u>J</u>	lohn Doe	
X Remove	<u>V</u> 2	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	RICHARD SCHWARZ	295 COQUINA AVE
Add			ORMOND BEACH, FL 32174
X Remove			
2) X Change	PTD	STEPHANIE SCHWARZ	295 COQUINA AVE
Add			ORMOND BEACH, FL 32174
Remove			
3) X Change	SD	JAMES SCHWARZ	2220 BEACH BLVD
Add			JAX BEACH, FL 32250
Remove			
4) X Change	VP D	ED SCHWARZ	1001 SHOCKNEY DRIVE
Add			ORMOND BEACH, FL 32174
Remove			
5) X Change	VP D	LINDA BRINKLEY	750 MILLBROOK LANE
Add			SOUTH DAYTONA, FL 32119
Remove			
6) Change	VP D	TRUDY PEGG	947 RUNNING BROOK DRIVE
$\frac{X}{Add}$			HOLLY, MI 48442
Remove			

	rticles, enter change(s) here: ). (Be specific)	
	<del></del>	
		_
lf an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
(у посирунсате, такие кум)		
<del></del>		
<del></del>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated  Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustree, or other court appointed fiduciary by that fiduciary)  STEPHANIE L SCHWARZ  (Typed or printed name of person signing)	
<u>VP</u>	
(Title of person signing)	