

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210001832783)))



H210001832783ADC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

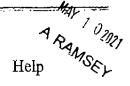
	To:	
	Division of Corporations	
	Fax Number : (850)617-6380	
	· · · · · · · · · · · · · · · · · ·	2021
	From:	~
ဆ	Account Name : FREEDOMTAX ACCOUNTING & MULTISERVICES, INC.	票.
58	Account Number ; I20180000068	737
9.	Phone : (407)344-1012	١.
	Fax Number : (407)344-1371	l
7L		0
	™# • }	11.
7-	**Enter the email address for this business entity to be used for future	
	annual report mailings. Enter only one email address please.**	0 <del>,</del>
HAY	-	0
321 H ≦∴	Email Address:	

## COR AMND/RESTATE/CORRECT OR O/D RESIGN LEBRON'S INDOOR BATTING CAGES INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



## Articles of Amendment to Articles of Incorporation of

FILED 2021 MAY -7 PM 2: 40

, 1

La

b.

; LEBRON'S INDOOR BATTING CAGES INC

LEBRON'S INDOOR BATTING CAGES INC	· · · · · · · · · · · · · · · · · · ·
(Name of Corporati	ion as currently filed with the Florida Dept. of State)
P06000040611	
(Docur	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the c	orporation:
LEBRON'S SPORTS PLEX INC	. The new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>)x</u> )
D. If amending the registered agent and/or registened new registered agent and/or the new registered	ered office address in Florida, enter the name of the 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 Reg	
hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Sien	ature of New Registered Agent, if changing
oign.	amio of 1104 negationed regions, y changing

## Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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>John Doe</u>	•
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add		· · · · · · · · · · · · · · · · · · ·	
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		<del></del>	
Remove			

If amending or adding additional A Attach additional sheets, if necessary,	y). (Be specific)
<u>-</u>	
<u> </u>	
	_ <del></del>
f an amendment provides for an exprovisions for implementing the ar (if not applicable, indicate N/A)	exchange, reclassification, or cancellation of issued shares, smendment if not contained in the amendment itself:  )
	<del></del>
<del></del>	

(Typed or printed name of person signing)

(Title of person signing)

**EVELYN LEBRON** 

PRESIDENT