P08000071929

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ALL SPOR	TS DEPOT INC	
DOCUMENT NUMBI	P0800007192	9	
	f Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
<u>i</u>	MARIBEL REYES	S	
,	ALL SPORTS DE	Name of Contact Persor	
	103400 OVERSE	Firm/ Company AS HWY # 105	_
	KEY LARGO FLO	Address ORIDA 33037	
_		City/ State and Zip Code	3
N/A			
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MARIBEL REYES		at (786	, 399-9197
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:
\$35 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)
Amer Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2012 AUG 13 AM 10: 34

ALL SPORTS DEPOT INC

SEURE FARY OF STATE (Name of Corporation as currently filed with the Florida Dept. of State) TALLAHASSEE FLORIDA PO8000071929 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 786 DOLPHIN AVENUE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) KEY LARGO FL 33037 C. Enter new mailing address, if applicable: 786 DOLPHIN AVENUE (Mailing address MAY BE A POST OFFICE BOX) KEY LARGO FL 33037 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A Name of New Registered Agent N/A (Florida street address) N/A New Registered Office Address: (City) 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>	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	VP	ANTONIO BLASSIO LOPEZ	786 DOLPHIN AVENUE
X Add			KEY LARGO FL 33037
Remove			<u></u>
2) Change		N/A	
Add			
Remove			
3) Change	 	N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
N/A	
4 //	
, , , , , , , , , , , , , , , , , , ,	
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	

The date of each amendment(s) a	doption: 1-31-12
Effective date <u>if applicable</u> : N	'A
mappinesore.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
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) ufficient for approval.
☐ The amendment(s) was/were app must be separately provided for	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.	opted 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 07-31-	·2012
Signature	Juna-ides.
·	lirector, 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
аррош	ted fiduciary by that fiduciary)
	MARIBEL REYES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)