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COVER LETTER

TO: Amendment Section Division of Corporations

.1 2*

NAME OF CORPORATION: _	BISHBOSH	SOCCER	ACADEMY INC.
DOCUMENT NUMBER:	POB 00009	5845	
The enclosed Articles of Amenda	nent and fee are submitted fo	r filing.	
Please return all correspondence	concerning this matter to the	following:	
	IA	N BISHO	ho
		of Contact Person	
	BISHB	OSH SOCO	ER ACADEMY INC.
		· · ·	
	7145 BUR	GESS DX	.
		Address	
	LAKE WO	ICTH, FL	33464
	City/ S	tate and Zip Code	
Cai	-/05 112993 il address: (to be used for fut	eyahoo.	com
E-ma	il address: (to be used for fut	ure annual report noti	fication)
For further information concerning	ng this matter, please call:		
IAN B	ISHOP	_at(_ <i>561</i> _)	876-2538 Daytime Telephone Number
Name of Contact	Person	Area Code &	Daytime Telephone Number
Enclosed is a check for the follow	ving amount made payable to	the Florida Departm	ent of State:
\$35 Filing Fee	tificate of Status Certi (Add	75 Filing Fee & fied Copy tional copy is osed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addr Amendment So Division of Co P.O. Box 6327 Tallahassee, F	ection rporations	Clifton Bu 2661 Exec	nt Section Corporations

Articles of Amen	dment	
· · · to Articles of Incorp	Oration	
Articles of fricting	/) \ (
BISHODSH SIXCER	Academy INC	
(Name of Corporation as currently filed with the Flori	da Dept. of State)	
POSDD0	795845	
(Document Number of Corporation (if kn	own)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	rida Profit Corporation adopts the following a	amendment(s) t
A. If amending name, enter the new name of the corporation:		
A1 / A		
		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" word "chartered," "professional association," or the abbreviation "P.A	'. A professional corporation name must co	reviation ntain the
B B	A1 /A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	/V/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
-		13 OC
D. If amending the registered agent and/or registered office address	in Florida, enter the name of the	آم) المستد رياز مستد برياز مستد
new registered agent and/or the new registered office address:	na 1 ioi tang carto. The hame of the	
Name of New Registered Agent N/A		
Name of New Registerea Agent		A CONTRACTOR
		نس
(Florida street o	address)	
New Registered Office Address:	, Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	and account the at the Course City and City	
,	and accept the obligations of the position.	
N/A		

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.

<u>X</u> 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) \(\text{Change} \)	_5	ROSA M. REYES	7145 Burgess Dr
Add			7145 Burgess Dr Lake Worth, FL 33467
Remove			33467
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	cles, enter change (Be specific)	•	
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		N/A	
			
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an amendment provides for an exch	anga raclassificat	ion or cancellation o	ficewood charas
un amendinent protides tor an exen	auge, iccinssificat	ton, or cancenation o	ent itself:
rovisions for implementing the ame	ndment if not cont	tained in the amendm	
rovisions for implementing the ame	ndment if not con	tained in the amendm	
rovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not con	lained in the amendm	
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rovisions for implementing the amer	ndment if not con	A	

	11.	
The date of each amendment(s) adoption:date this document was signed.	October 7th	, if other than the
Effective date if applicable:	October 7th October 4th nore than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK C	<u>DNE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	olders. The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the sharel must be separately provided for each voting group	nolders through voting groups. The following statement entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment((s) was/were sufficient for approval	
by	,31	
by	шр)	
The amendment(s) was/were adopted by the board of action was not required. The amendment(s) was/were adopted by the incorporaction was not required.	of directors without shareholder action and shareholder orators without shareholder action and shareholder	
Dated_October	744	
DatedOctober Signature	Bestop	
(By a director, president or	rother officer—'if directors or officers have not been or — if in the hands of a receiver, trustee, or other court	
	IAN BISHOP	
(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	