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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Orlando Metro Gymnastics-Baldwin Park, Inc.		
DOCUMENT NUMBER:	P09000058337		
The enclosed Articles of Amenda	ent and fee are submitted for filing.		
Please return all correspondence	oncerning this matter to the following:		
	Stephen M. Stone, Esquire		
	Name of Contact Person		
	Law Offices of Stephen M. Stone		
	Firm/ Company		
	725 North Magnolia Avenue		
	Address		
	Orlando, Florida 32803		
	City/ State and Zip Code		
Sandy. E-mail ad	DeJarnett@orlandometrogymnastics.com Iress: (to be used for future annual report notification)		
For further information concernir	g this matter, please call:		
Stephen M. Stone, I			
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the follow	ing amount made payable to the Florida Department of State:		
□ \$35 Filing Fee □ \$43.75 Fil Certificate			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment to **Articles of Incorporation** of

ORLANDO METRO GYMNASTICS-BALDWIN PARK, INC.

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

P09000058337

(Document Number of Corporation (if known)

OSEP 3 PA 3. 40 Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

ORLANDO METRO GYMNASTI		
abbreviation "Corp.,"."Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," "Inc,	" or "Co". A professional corporation
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREE</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		
D. If amending the registered agent and/or re	egistered office address in	Florida, enter the name of the
new registered agent and/or the new regis		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street aa	idress)
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changin hereby accept the appointment as registered ag		nd accept the obligations of the position.
Si	ignature 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
E. <u>If ame</u> (attach	nding or adding additional A additional sheets, if necessary	rticles, enter change(s) here:). (Be specific)	
<u>provi</u>	amendment provides for an a sions for implementing the a foot applicable, indicate N/A)	exchange, reclassification, or cancellati mendment if not contained in the amer	ion of issued shares, adment itself:
,			
V			

The date of each amendment	(s) adoption: July 9, 2009
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statemer ad 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	19
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
DatedSignature	July 9, 2009
	diffector, president or other officer – if directors or officers have not been
sele	by an incorporator — if in the hands of a receiver, trustee, or other court
арр	ointed fiduciary by that fiduciary)
	Jeffrey L. Wood
	(Typed or printed name of person signing)
	(Typed or printed name or person signing)
	President
	(Title of person signing)