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(Requestor's Name)		
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2012 HAY 29 P 2: U



COVER LETTER

TO: Amendment Section

Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: **□\$43.75** Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporatio

Articles of incorporation	
1/5 / / / / / / / / / / / / / / / / / /	Q101 CC 1.10
MY B GOLF CHRTC	SPLES, INC
(Name of Corporation as currently filed with the Florida Dep	t. of State)
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Pro</i> its Articles of Incorporation:	ofit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "compound "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A proposed "chartered," "professional association," or the abbreviation "P.A."	The new any," or "incorporated" or the abbreviation of ssional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
.u	
	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	
-,	
D. If amending the registered agent and/or registered office address in Flori	ide enter the name of the
new registered agent and/or the new registered office address:	Cast Cites the name of the
Name of New Registered Agent	
Nume of New Negisierea Agent	
(Florida street 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 accept the appointment as registered agent.	ent the obligations of the position
The second with the suppose the second of th	op. me ounganons of me position.
Cl	
Signature of New Registered Agent, if cha	nging .

TILED 1 HAY 29 P 2: 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.

Example: X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	V8TD	Bichard Randazzo	5915 Trieds Dr Helbourne, FL 32940
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove		•	
5) Change Add Remove	-55	<u> </u>	
6) Change Add Remove			

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f an amendment provides for an excl provisions for implementing the ame	hange, reclassification	on, or cancellation	of issued shares,	
(if not applicable, indicate N/A)	sitement ii not comta	med in the amend	ment usen.	
		· · · · · · · · · · · · · · · · · · ·	··	
		, <u></u>		
				
		<u></u>		

he date of each amendment(s) adop	orion:
ffective date <u>if applicable</u> :	
<u></u>	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	r the amendment(s) was/were sufficient for approval
by	(voting group)
	ed by the incorporators without shareholder action and shareholder
DatedSignature	25/12 1. Mr.L
(By a dire selected,	by an incorporator – if in the hands of a receiver, trustee, or other court if induciary by that fiduciary)
_	(Typed or printed name of person signing)
_	Pre sident (Title of person signing)