## P120000 50035

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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: KB Soccer, Inc. DOCUMENT NUMBER: P12000050035 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Marcelo Radice Name of Contact Person KB Soccer, Inc. Firm/ Company 70 Bay Heights Drive Address Miami, FL 33133 City/ State and Zip Code maradice@keybiscaynesoccerclub.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 ) 972-2222

Area Code & Daytime Telephone Number Jackie Kellogg-Gross Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & 📕 \$35 Filing Fee □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

KB Soccer, Inc.

(Name of Corporation as curre	ently filed with the Florida Dep	t. of State)
P12000050035		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his <i>Florida Profit Corporation</i> a	dopts the following amendment(s)
A. If amending name, enter the new name of the corporation	<u>:</u>	
		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.	. A professional corporation r	or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if applicable:		20 F
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		Ei Ei
	<del></del> -	
		<del></del>
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u></u> ω
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D. If amending the registered agent and/or registered office a		me of the
new registered agent and/or the new registered office add	ress:	
Name of New Registered Agent		
20.		
(Florida	a street address)	
New Registered Office Address:		_, Florida
•	(City)	(Lip Code)
Non-Devictored Agents Circustore of the gains Devictored Agents		
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili		ns of the position,
Grand CV		
Signature of Ne	w Registered Agent, if 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.

Example: X Change	<u>PT</u>	John Doe	ECRES TALLA
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) X Change	<b>P</b> 19	Marcelo Radice	70 Bay Heights Drive
Add			Miami, FL 33133
Remove			
2) X Change	V	Jackie Kellogg-Gross	115 SUNRISE DRIVE, UNIT 5A
Add			Key Biscayne, FL 33149
Remove 3) Change	V	Sofia Sohl	370 Woodcrest Road
Add			Key Biscayne, FL 33149
X Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
<ol> <li>Сhange</li> </ol>			<del> </del>
Add			
Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	FEB -	Anger
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The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this bloodocument's effective date on the Department.	ck does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without share	eholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the a icient for approval.	imendment(s)
• • • • • • • • • • • • • • • • • • • •	wed by the shareholders through voting groups. The followich voting group entitled to vote separately on the amendm	•
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	2020 FEB SECTALLIA
Dated	23/2020-	EB -6
	ctor, president or other officer - if directors or officers have	
	by an incorporator – if in the hands of a receiver, trustee, of fiduciary by that fiduciary)	or other court $\qquad \qquad \qquad$
-	Marcoft Radice (Typed or printed name of person signing)	
	President	
_	(Fitle of person signing)	