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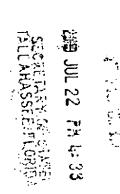
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COVER LETTER.

TO: Amendment Section Division of Corporations JE 22 7 1. 5. NAME OF CORPORATION: 8 BALL SHOOTERS, INC. DOCUMENT NUMBER: P12000086668 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **DAVID CINTRON** Name of Contact Person 8 BALL SHOOTERS, INC Firm/ Company 1440 SE SAN SOVINA TER Address PORT ST. LUCIE, FL. 34952 City/ State and Zip Code CINTRONEMAIL@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DAVID CINTRON at (<u>772</u>) <u>215-2783</u> Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & **4**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment Articles of Incorporation

8 BALL SHOOTERS, IN	IC.	F-71
	oration as currently filed with the Florida Dept. of State)	200
P12000086668		
(De	ocument Number of Corporation (if known)	\$ 15 P
Pursuant to the provisions of section 607.1006, Flo	orida Statutes, this Florida Profit Corporation adopts the fo	ران llowing amendme
its Articles of Incorporation:		
A. If amending name, enter the new name of the	he corporation:	9.74 19.74
	word "corporation," "company," or "incorporated" or	The ne
"Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or B. Enter new principal office address, if applic (Principal office address MUST BE A STREET).	eable:	e must contain th
(Frincipal office data ess MISST BE ASSISTED)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	
,		
D. If amending the registered agent and/or reg new registered agent and/or the new register	istered office address in Florida, enter the name of the ered office address;	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida_	
	(City)	(Zip Code)

New Reg ist er ed Ag ent 's Sig na t ure, if changing Reg ist er ed Ag ent:

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) Change	SV	DENISE MARY CINTRON	1440 SE SAN SOVINA TER
X Add			PORT ST. LUCIE, FL.
Remove			34952
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

	onal sheets, if necesso	rry). (Be specif.	IC)			
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<u> </u>						
rovisions fo	nent provides for an or implementing the oplicable, indicate N	amendment if n	ot contained in	uncellation of is the amendment	sued shares. itself:	
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			<u> </u>			

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Note: If the date inserted in this block does not meet the applied document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE)	90 days after amendment file date) icable statutory filing requirements, this date will not be listed as t
(no more than Note: If the date inserted in this block does not meet the appli document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE)	
Adoption of Amendment(s) (CHECK ONE)	cable statutory filing requirements, this date will not be listed as t
_	
The amendment(s) was/were adopted by the shareholders. Th	
by the shareholders was/were sufficient for approval.	e number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/we	ere sufficient for approval
byDAVID_CINTRON	
(voting group)	
The amendment(s) was/were adopted by the board of director action was not required. The amendment(s) was/were adopted by the incorporators wit action was not required.	
Dated 7/18/19	
Signature	
	icer – if directors or officers have not been
selected, by an incorporator - if in the appointed fiduciary by that fiduciary	ne hands of a receiver, trustee, or other court)
DAVID CINTRON	
(Typed or printed	name of person signing)