# P1300033112

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

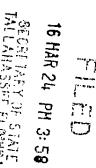
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MAR 30 2016



## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Sports Shop TV, Inc.
DOCUMENT NUMBER: F130000 231/1
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jan Orgio
Name of Contact Person
Firm/ Company
8926 Sev 7014
Address
Boca Retur, FL 33433  City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jan Orza ar (561) 385-5084
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:
Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certificate of Status  (Additional Copy is enclosed)  Certificate of Status  Certificate Opy  (Additional Copy is enclosed)

# **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

FILED

South Ito TV Too	16 MAR 24 PM 3: 58
(Name of Corporation as currently filed with the Florida B	opt of State) OF STATE
(Document Number of Corporation (if known)	
arsuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> Articles of Incorporation:	n adopts the following amendment
If amending name, enter the new name of the corporation:	
me must be distinguishable and contain the word "corporation," "company," or "inco- Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corpord "chartered," "professional association," or the abbreviation "P.A."	The new orporated" or the abbreviation poration name must contain the
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the	name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	_, Florida
(City)	(Zip Code)
Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)	
ew Registered Agent's Signature, if changing Registered Agent:  vereby accept the appointment as registered agent. I am familiar with and accept the obligat	ions 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	PT John l	<u>Doe</u>	
X Remove	V Mike	<u>Jones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	PO	Wayne Riggins JI	525 campus pr.
Add		•	Celebration FL34747
Remove			
2) Change	70	Stephanie Riggia	525 Campus Di
Add			celebration FL3474
Remove			
3)Change	50	Jeanst te Orazio	
Add			Boca Raton FB 3433
Remove			
4) Change	·		
Add			
Remove			
5) Change			
Add			
Remove			
		<i>y</i>	
6) Change	<del></del> _		
Add			
Remove			

			<del> </del>	· <del></del>	<u> </u>
				· · · · · · · · · · · · · · · · · · ·	. <del></del> .
					. <del></del>
f an amendment provides for an exe provisions for implementing the ame (if not applicable, indicate N/A)	bange, reclassificat endment if not cont	ion, or cancell ained in the ar	ation of issued mendment itse	i shares, elf:	
		·			
	·			····	
			<del></del>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	'a
Effective date if applicable: 3/3	1/16
	(no more than 90 days after amendment file date)
	ot meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE)
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) pproval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amen	dment(s) was/were sufficient for approval
by	ing group)
(voi	ing group)
The amendment(s) was/were adopted by the action was not required.	poard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
Dated3/21/1	• 6
Signature Wayne	dent of other officer – if directors or officers have not been
(By a director, pres	dent of other officer - if directors or officers have not been
selected, by an inco	rporator - if in the hands of a receiver, trustee, or other court
appointed fiduciary	by that fiduciary)
Wa	Yne wiggins Typed or printed name of person signing)
	Typed or printed name of person signing)
	CEO (Title of person signing)
`	(Title of person signing)