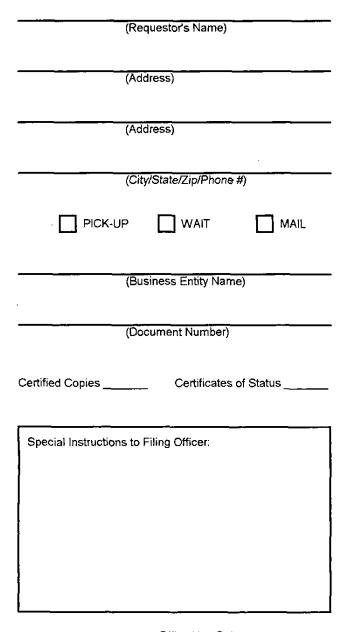
## P13000064404



Office Use Only



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SEP 1 7 2013

T. BROWN

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	West Kendall Basketball Association	In			
DOCUMENT NUMBER:	13000064404				
The enclosed Articles of Amendmen	nt and fee are submitted for filing.				
Please return all correspondence con	ncerning this matter to the following:				
	Tommy Perice				
	Name of Contact Person WEST KendrIL BASKETBALL ASSO.				
13952 Kendsle lakes Dr.					
MiAmi FL 33/83					
	City/ State and Zip Code				
E-mail a	ddress: (to be used for future annual report notification)				
For further information concerning t	his matter, please call:				
Tomm/ Pearce Name of Contact Per	at ( 305 ) 588 - 026 8  Son Area Code & Daytime Telephone Number	-			
Enclosed is a check for the following	g amount made payable to the Florida Department of State:				
	5 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee cate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)				
Mailing Address	Street Address				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) 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 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: (City) New Registered Agent's Signature, if changing Registered Agent: 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> <u>John</u>	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mık</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name :	<u>Addres</u> s
1) Change	TO	Alessandro Fowte	13952 Kendule lakes Miami FC
Add			MAMI FC
_X Remove		νn: 0	33193
2) Change	1	Katherine Pearce	13952 Kendale lake Miani FL
X_Add			MIAMIFL
Remove			33/93
3)Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additional sheets</i>	additional Articles, of necessary). (Be	specific)		
			· · · · · · · · · · · · · · · · · · ·	
		· · ·		
	<del></del>			
			<del></del>	
			<u></u>	
If an amendment provi	idae far an avehanga	raelaccitication	ar cancellation of i	senod charoc
provisions for implem	enting the amendme	nt if not containe	d in the amendmen	t itself:
(if not applicable,	indicate N/A)			
				<u> </u>
				_

		, if other than th
	date this document was signed.	
	Effective date if applicable:  (no more than 90 days after amendment file date)	_
	Adoption of Amendment(s) (CHECK ONE)	
<del>-</del> >	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
	☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
	"The number of votes east for the amendment(s) was/were sufficient for approval	
	by	
	(voting group)	
	☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
NOT	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
	Dated9-3-2013	
	Signature  (By a director, president or other of fiver – if directors or officers have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
	Tommy Pearce (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title at person signing)	