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Mor-Sports Grou 1242 SW Pine Isla Ste 42 # 408 Cape Coral FL 339	and Rd			
(Address)				
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(Ci	ty/State/Zip/Phone	e #)		
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(Business Entity Name)				
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8 SEP 28 ANTI: 12

OCT 01 2018

S. YOUNG



September 19, 2018

MOR-SPORTS GROUP, INC 1242 SW PINE ISLAND ROAD STE 42-408 CAPE CORAL, FL 33991

SUBJECT: MOR-SPORTS GROUP, INC.

Ref. Number: P16000047333

We have received your document for MOR-SPORTS GROUP, INC. and check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 318A00019575

18 SEP 28 PM 12: 3 SECRETARY (*) * **

Articles of Amendment

to s Articles of Incorporation

of

Mol-sports alw	PINC
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P16000047	333
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," o word "chartered," "professional association," or the abbreviation	ttion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the
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 <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	
Name of New Registered Agent	SEP T
	28 Z
(Florida	street address)
New Registered Office Address:	(City) Florida Single Godei
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	
Signature of Ne	w 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 <math>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	<u>Doe</u>	
X Remove	V Mike	<u>Jones</u>	
<u>X</u> Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PRES	JONATHON MOKTON	240 SE 30TH TERRACE
Add			CAPE CORAL FL 3399
Remove			
2) KChange	VP	Matthew Morton	1242 Sw Pine Island Rd
Add	·		Sve 42 # 408
Remove	_		CAPE COLAL ALBORA
3) Change	<u> P. </u>	MATTHEW MORTON.	1242 Sw Pine Island R
<u>₩</u> Add			Sve 42 # 408
Remove			Cape Coral F. 33991
4) Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
	
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an amendment provides for an exch	nange, reclassification, or cancellation of issued shares.
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable indicate M/A)	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 315/ August 2018 date this document was signed.	_, if other than the
Effective date if applicable: 150 5000000000000000000000000000000000	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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 cast for the amendment(s) was/were sufficient for approval	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 9/15/18	
Signature (By a director, president or other officer – 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)	-
(Typed or printed name of person signing)	-
CO. SECRETARY (Title of person signing)	
(Title of person signing)	