

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190000585523)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Ta:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SANDRA ROLON & ASSOCIATES, CPA, PA

Account Number: I19990000068 Phone : (954) 437-0700 Fax Number : (954)436-8195

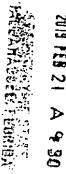
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN

THE SPORTS PROPHETS INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00





Electronic Filing Menu

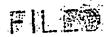
Corporate Filing Menu

HelpT. LEMEUX

FEB 2 2 2019

±9000058552 3

Articles of Amendment to
Articles of Incorporation



Articles of Incorpo of

2049 FEB 21 A 9 30

THE SPORTS PROPHETS, INC.	CUAD FED ET A 1 50
(Name of Corporation P16000089592	on as currently filed with the Florida Dept. 6(State)
	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Floridu Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the co	rporation:
	The new
name must be distinguishable and contain the worn "Corp" "Inc.," or Co.," or the designation "Corp. word "chartered." "professional association," or the	d "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	ERESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>x</u>)
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street oddress)
New Registered Office Address:	. Florida
NOW MODIFICATION OF THE PROPERTY OF THE PROPER	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
Sign	ature of New Registered Agent, if changing

H19000058552 3
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>PΤ</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	S	ROBERT ANTHONY BUTO JR.	5645 CORAL RIDGE DR. #229
X Add			CORAL SPRINGS, FL 33076
Remove			
2) Change	s	MARK COHEN	5645 CORAL RIDGE DR. #229
X Add			CORAL SPRINGS, FL 33076
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
_		<u> </u>		•	
				<u> </u>	
	·				
					
			······································		
					
			<u> </u>		· · · · · · · · · · · · · · · · · · ·
			 ·~		
prov	amendment provides for an exchan visions for implementing the amend (if not applicable, indicate N/A)	nge, reclassification in the land in the l	on, or cancellation ined in the amend	of issued shares, Iment itself:	
					· · · · · · · · · · · · · · · · · · ·
		··· <u>-</u>			
					·
		·			

H19000058552 3

The date of each amendment(s date this document was signed.	adoption: 2-30	-2019	, if other than the
-			
Effective date if applicable:	(no more than 90 days af	Per amendment file date)	
Note: If the date inserted in the	block does not meet the applicable stat Department of State's records.	utory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were by the shareholders was/were	dopted by the shareholders. The number sufficient for approval.	of votes cast for the amendment(s)	
	pproved by the shareholders through voti or each voting group entitled to vote sepa		
"The number of votes of	st for the amendment(a) was/were sufficie	ent for approval	
ьу	(valing group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(valing group)		
☐ The amendment(s) was/were action was not required.	depted by the board of directors without	shareholder action and shareholder	
The amendment(s) was/were action was not required.	dopted by the incorporators without share	cholder action and shareholder	
Dated	20119		
√ Signoture	Mm //m		
(By	director, president or other officer - if di ted, by an incorporator - if in the hands o inted fiduciary by that fiduciary)		
	NICHOLAS ACOCELLA		
	(Typed or printed name of	person signing)	
	VICE PRESIDENT		
	(Title of nercon	(Airolay)	