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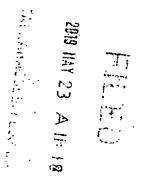
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COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Florida Amuteur Sports Toumanients Inc					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Name of Contact Person Plovide American Sports Tournaments Inc Firm/ Company Will Exercise Part Place D. Swite 2010 Address Gacksmothe, R 32257 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:					
Name of Contact Person at (904) 476-9635 Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee					
Mailing Address Street Address					

Amendment Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

to

Articles of Incorporation

	of
Thonda Amakur	Sports Torrament Inc.
(Name of Corporation)	ion as currently filed with the Florida Dept. of State)
719000039311	2019 HAY 23 A 15 LO
(Docur	2019 HAY 23 A 11: 18
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the co	orporation:
	The new
"Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>
D. If amonding the registered agent and/or register	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
Nume by Well Negatiered Figers	
	(Florida street address)
New Registered Office Address:	, Florida
, carriegane on opposite the carrier of the carrier	(City) (Zip Code)
New Registered Agent's Signature, if changing Re- I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.
, , ,	
Sign	nature 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	 		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	# *		
Add			
Remove			

	(Be specific)
	1.3
··	
n amendment provides for an excl	hange, reclassification, or cancellation of issued shares.
n annengament provides for an exer	
	endinent if not contained in the amendment itself:
	endment if not contained in the amendment itsen:
ovisions for implementing the ame	endment it not contained in the anjendment itsen:
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nvisions for implementing the ame (if not applicable, indicate N/A) Mayes	

The date of each amendment(s) adoption: 571/19 date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	l not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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" (voting group)	
(voting group)	
☐ 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 5/20/19	
Signature (By a prector, 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)	
Luis A. Alicea	
(Typed or printed name of person signing)	
President	
(Title of person signing)	