## P22000059580

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SECRETARY OF STATE

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## COVER LETTER . . .

Division of Corporations
NAME OF CORPORATION: Pickle Ball Head, Inc.  DOCUMENT NUMBER: P2200059550
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dania S. Fernandez  Name of Contact Person  Dania S. Fernandez I ASSOC. P. A  Firm/ Company  13500 SW 88 ST Ste. 265  Address  Miami, Fr. 33186  City/ State and Zip Code  dania @dsf-pa. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dania 5 Fernandez at 305 , 254 4492  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:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## Articles of Amendment

## Articles of Incorporation of

Pickle Ball Head In	C .
(Name of Corporation as currently	iled with the Florida Dept. of State)
P22000059580	
(Document Number of C	Torporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Pickleball Head In	The new
name must be distinguishable and contain the word "corporation." "co "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A mattered." "professional association." or the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp"
B. <u>Enter new principal office address</u> , if <u>applicable</u> : (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
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 addressive registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
tFlorida stree	(address)
New Registered Office Address:	Florida
K	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
Signature of New Reg	istered Agent, if changing
Check if applicable  ☐ The amendment(s) is 'are being filed pursuant to s. 607.0120 (11) (e	), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change		<u> </u>	
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
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ttach additional sheets, if	ditional Articles, ente necessary).— (Be spec	rific)		
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an amendment provides	for an aschanus, rac	Inscification or equ	neallation of icenad	charac
rovisions for implement	ing the amendment if	not contained in t	he amendment itsel	<u>snares,</u> <u>lf:</u>
(if not applicable, indi	cate N/A)			
				_ <del></del>
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The date of each amendment(s) adoption: date this document was signed.	8/10/22	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department of	not meet the applicable statutory filing requirements, this dat of State's records,	te will not be listed as the
Adoption of Amendment(s) (CF	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s approval	s)
	he shareholders through voting groups. The following stateme g group entitled to vote separately on the amendment(s):	mt
"The number of votes east for the ame	endment(s) was/were sufficient for approval	
by	oting group)	
Signature  (By a director, presselected, by an incomposited fiduciary	sident or other officers if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other country by that fiduciary)  NICL S. FELOCUME  (Typed or printed name of person signing)  Resident  (Title of person signing)	1