P23000042049

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(City/State/Zip/Phone #)
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(Document Number)
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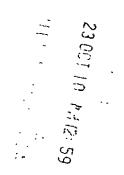
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COVER LETTER	
	TO: Amendment Section Division of Corporations
+ Street Boxing Gym IAMPA Inc.	NAME OF CORPORATION: FCONT DOCUMENT NUMBER: P2300
	The enclosed Articles of Amendment and fee are sul
-	·
Name of Contact Person Trout Street Boxing Gym Nauph The Firm/Company 14968 N. Horida Ave Address TAMPA Pl. 33613 City/State and Zip Code garyrini & Jahoo. Com be used for future annual report notification)	1/2
at (813) 390-7618 Area Code & Daytime Telephone Number ade payable to the Florida Department of State: & S43.75 Filing Fee & S52.50 Filing Fee is Certified Copy Certificate of Status (Additional copy is Certified Copy	For further information concerning this matter, pleas Name of Contact Person Enclosed is a check for the following amount made \$35 Filing Fee Certificate of Status
at (S13) 390-761 S Area Code & Daytime Telephone Number ade payable to the Florida Department of State: & S43.75 Filing Fee & S52.50 Filing Fee IS Certified Copy Certificate of Status	For further information concerning this matter, pleas Name of Contact Person Enclosed is a check for the following amount made \$35 Filing Fee \$43.75 Filing Fee &

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address Amendment Section Division of Corporations The Centre of Tallahassee

Articles of Amendment

to Articles of Incorporation

of
trant Street Boxing Gym TAURA INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
P23000042049
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Aug : 1) Hockey Association Inc.
AME *ICAN HOCKEY ASSOCIATION Inc. The new 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) WAY TAMPA 41. 336B
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 13836 Stone Will WM TAWPA PL. 33613
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:, Florida
(City) (Zip Code)
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
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)

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: <u>X</u> Change	<u>PT</u>	John Do	<u>e</u>	
\underline{X} Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change			<u></u>	
Add				
Remove				
6) Change				<u></u>
Add		-		
Remove				

ttach additional sheets, if necessary).	(Be specific)			
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	na a se as	11 61		
an amendment provides for an excrovisions for implementing the am	endment if not containe	d in the amendment itse	snares,	
(if not applicable, indicate N/A)				
		<u> </u>		
<u></u>				
			·····	

The date of each	amendment(s) adoption: nt was signed.	/()/5/a3		_, if other than the
Effective date <u>if</u>	applicable:	10	$\frac{ s }{23}$		
		(no more than 90 da	vs after amendment file	date)	
	inserted in this block does no tive date on the Department of		statutory filing require	ements, this date will r	not be listed as the
Adoption of Am	endment(s) (<u>CH</u>	ECK ONE)			
The amendme action was not	nt(s) was/were adopted by the i required.	ncorporators, or boar	d of directors without sh	nareholder action and s	hareholder
	nt(s) was/were adopted by the solders was/were sufficient for a		mber of votes cast for th	e amendment(s)	
	nt(s) was/were approved by the rately provided for each voting				
"The nu	mber of votes east for the amen				
by	Floridu Box	ng group)	TACOPOL TUC.		
	Dated	23			
			if directors of officers I		-
	appointed fiduciary	by that fiduciary)			
		GAR	W Kim		
	(Typed or printed nam	e of person signing)		<u>.</u>
			Egisteral	Agent	·
	(Title of person signing	2)	~	