P2300068287

(Re	questor's Name)	-			
(Adı	dress)				
(Åde	dress)				
(Cit	y/State/Zip/Phone	e #)			
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(Do	cument Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: CLIFFPICKLEBA	LL USA INC	
DOCUMENT NUM	IBER: P23000068287		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
		 	
		Name of Contact Persor	1
	Axiom Business Consulting I	LLC	
		Firm/ Company	
	13234 Telecom Dr		
		Address	
	Tampa, FL 33637		
		City/ State and Zip Code	2
	documents@axiombusinessc	onsulting.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Seema Jain		at (977-0089) de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di [,] P.C	ailing Address mendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio The Co	Address Iment Section In of Corporations Cutre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

CLIFFPICKI FRALL HSA 1890

(Name of Corporat	ion as currently filed with the Flori	-
	ton as currently thea with the 1 ton	ida Dept. of State)' L
	P23000068287	2024 FEB 23 EM P. 1.1
Юосш	ment Number of Corporation (if know	
(2003)	(Silv.
arsuant to the provisions of section 607.1006. Florid s Articles of Incorporation:	a Statutes, this Florida Profit Corpo	ration adopts the following amendment(
. If amending name, enter the new name of the c	corporation:	
·	OBAL PICKLEBALL INC.	7.1
ime must be distinguishable and contain the word "c Inc.," or Co.," or the designation "Corp," "Inc. chartered," "professional association," or the abbr	" or "Co". A professional corpor	
Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET AD</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)X</u>)	
. If amending the registered agent and/or registenew registered agent and/or the new registered		the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	(t torida street address)	. Florida

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.

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
1) Change		_	
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	
	
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•	
<u>If an amendment provides for an exch</u>	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable indicate V/O	
(if not applicable, indicate N/A)	

.

•	•	DECEMBER 31, 2023	
	ich amendment(s) add nent was signed.	pption:	, if other than the
Effective date	if applicable:		
		(no more than 90 days after amendment file date)	
		ock does not meet the applicable statutory filing requirements, that artment of State's records.	his date will not be listed as the
Adoption of Amendment(s)		(CHECK ONE)	
	ment(s) was/were adop not required.	ted by the incorporators, or board of directors without shareholde	er action and shareholder
	ment(s) was/were adop cholders was/were suft	ted by the shareholders. The number of votes cast for the amend icient for approval.	ment(s)
must be sej	parately provided for ed	oved by the shareholders through voting groups. The following stack voting group entitled to vote separately on the amendment(s) or the amendment(s) was/were sufficient for approval	
_		,	
by _		(voting group)	
	FEBRU Dated	ARY 15, 2024	
		RAFAEL AMORIM	
	(By a dire selected,	vetor, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or othe d fiduciary by that fiduciary)	
		RAFAEL AMORIM	
	_	(Typed or printed name of person signing)	
		PRESIDENT	

(Title of person signing)

eSignature - Certificate of Completion

Document id:

F2FJSKKD

Signatures:

Initials:

Signature originator:

Seema Jain (sjcpa@axiombusinessconsulting.com)

Originator IP address:

47.207.26.222

Time zone:

UTC

Document pages:

4

Signers

Signer:

RAFAEL AMORIM

rafaeljoaoamorim@gmail.com

IP address:

35.145.208.116

User id:

G7X9K71JB

Timestamp: Sent - 15/02/2024 04:05 PM

Opened - None

Signed - 17/02/2024 07:06 PM

Signature

RAFAEL AMORIM

RAFAELAMORIM