P2400004944G

(Requestor's Name)
(Address)
(Address)
(100.000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodinelli Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
-





100434830221

08/16/24--01012--005 **35.00

2024 AUG 16 (M11: 12



COVER LETTER

TO: Amendment Section Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

(Additional copy is

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation

	of
Hal	ort Sports Group Inc
(Name of Corporati	ion as currently filed with the Florida Dept. of State)
·	PAYONNOH9446
(Docur	ment Number of Corporation (if known)
its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	corporation:
	The new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," ," or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable:	aug.
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>
	(0.53
	ered office address in Florida, enter the name of the
D. If amending the registered agent and/or registe	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
	(Florida street address)
New Registered Office Address:	Florida, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	gistered Agent:
	I am familiar with and accept the obligations of the position.
Sign	nature of New Registered Agent, if changing
Check if applicable	
\Box The amendment(s) is/are being filed pursuant to s.	607.0120 (11) (e), F.S.

amending or adding additional Articles, enter change(s) here: Atach additional sheets, if necessary). (Be specific)	
	•
	
	2024 AUG 16 SECRETARY TALLAHA
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	TACR HA
orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	A AUG 16 TALLAHAS
(3 ··· · · · · · · · · · · · · · · · · ·	是 1000 1000 1000 1000 1000 1000 1000 10
	OF STATE
	EE 5
	77 N
	·

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 Doc	
X Remove	Y	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) X Change	<u> </u>	Arnold E. Goldberg	187 Seville H
Add Remove			Delvy Burds Pl. 33446
2) Change		Arnold E. Goldberg	187 Seville H. Delvay Bend A.
3) Remove Change Add	P	GARY Bin	13636 Strong By EUNG
Remove 4) Change Add			TAMPA AL SANSES
Remove 5) Change Add			PA 2
Remove 6) Change Add			
Remove			

The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date if applicable:		
Effective date in applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of S	meet the applicable statutory filing requirements, this date we state's records.	fill not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)	
The amendment(s) was/were adopted by the in action was not required.	ncorporators, or board of directors without shareholder action as	nd shareholder
☐ The amendment(s) was/were adopted by the short by the shareholders was/were sufficient for ap	nareholders. The number of votes cast for the amendment(s) oproval.	
☐ The amendment(s) was/were approved by the must be separately provided for each voting g	shareholders through voting groups. The following statement roup entitled to vote separately on the amendment(s):	
"The number of votes east for the amend	ment(s) was/were sufficient for approval	
hy	g group)	
DatedS//	1/24	
Signature (By a director, preside selected, by an incorp appointed fiduciary b	ent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)	<u>.</u>
	yped or printed name of person signing)	SECRETALIS TO
	President	第 5 m
(T)	itle of person signing)	FSTATE EE, FL