

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8370 • 1-800-342-8062 • Fax (850) 222-1222

P98000079352

Sanctuary Skate Parks
Inc.

300002932533--6
-07/15/99--01074--015
*****43.75 *****43.75

Name

- Art of Inc. File Change
LTD Partnership File _____
Foreign Corp. File Amend
L.C. File _____
Fictitious Name File _____
Trade/Service Mark _____
Merger File _____
☒ Art. of Amend. File _____
RA Resignation _____
Dissolution / Withdrawal _____
Annual Report / Reinstatement _____
☒ Cert. Copy _____
Photo Copy _____
Certificate of Good Standing _____
Certificate of Status _____
Certificate of Fictitious Name _____
Corp Record Search _____
Officer Search _____
Fictitious Search _____
Fictitious Owner Search _____
Vehicle Search _____
Driving Record _____
UCC 1 or 3 File _____
UCC 11 Search _____
UCC 11 Retrieval _____
Courier _____

RECEIVED

99 JUL 15 PM 1:37

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
99 JUL 15 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature _____

Requested by: LS

7/15/99 1:15

Name

Date

Time

Walk-In _____

Will Pick Up _____

ARTICLES OF AMENDMENT
SANCTUARY SKATE PARKS, INC.

The following provisions of the Articles of Incorporation of
SANCTUARY SKATE PARKS, INC., a Florida Corporation, number
P98000079352, be and they hereby are amended in the following
particulars:

1. Article I, be and it is hereby amended to
follows:

ARTICLE I - NAME

The name of this Corporation is SANCTUARY SKATE PARK-MACON,
INC.

The foregoing amendment was adopted by unanimous consent of
the Stockholders and Directors of the Corporation on the 14 day of
July, 1999.

SANCTUARY SKATE PARK, INC.

BY: Linda Rice
TITLE: President

STATE OF FLORIDA
COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this 14th
day of July, 1999 by Linda Rice as the President
of SANCTUARY SKATE PARKS, INC., a Florida corporation, on behalf of
the corporation. She is personally known to me or produced _____
as identification.

Lisa M. Calyore
Notary Public

(Seal)

Printed Name: _____
My Commission Expires: _____

