## L14000099969

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





700365631077

85/17/21--01617--038 \*\*25.00

2021 NOV 17 FH 12: 33

1.-1

## **COVER LETTER**

	tion Section of Corporations					
SUBJECT: Abil	ity America Group, LLC		· •			
30bJEC1	N	ame of Limited Liability Compar	ny			
The enclosed Arti	cles of Amendment and fee	(s) are submitted for filing.				
	ALEXANDRE .	JULIANELLI DO NASCIME	ENTO			
		Name of Perso	on			
	_	Firm/Compan	y			
	2208 S. Fiske Bi	vd				
	Rockledge FL 3	Address 2955				
			Code			
	gbrockledge@gm	Name of Limited Liability Company  ent and fee(s) are submitted for filing.  concerning this matter to the following:  EXANDRE JULIANELLI DO NASCIMENTO  Name of Person  Firm/Company  S. Fiske Blvd  Address  ledge, FI. 32955  City/State and Zip Code  cledge@gmail.com  E-mail address: (to be used for future annual report notification)  et this matter, please call:  at (				
	E-mai	l address: (to be used for future a	innual report notification)			
For further inform	ation concerning this matter	r, please call:				
Adrienne Brace, C	PA		417-5544			
	Name of Person		Daytime Telephone Number			
Enclosed is a chec	k for the following amount:					
■ \$25.00 Filing	<u> </u>	Status Certified Co	py Certificate of Status & Certified Copy			
Mailing /						
	tion Section of Corporations		Registration Section Division of Corporations			
P.O. Bo	x 6327		e Centre of Tallahassee			
Tallahas	see, FL 32314	2/1	IS N. Monroe Street, Suita 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ability America Group, LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Comparellorida document number L14000099869	ny were filed on 06/23/2014	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
Rockledge Jiu-Jitsu, LLC		
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		<del>-</del>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office	address on our records, enter the na	ame of the new regist
gent and/or the new registered office address here:	· · · · · · · · · · · · · · · · · · ·	2021:
		<del>-</del> :
Name of New Registered Agent:		
New Registered Office Address:		_;
	Enter Florida street address	
	, Florida	11/2
	, Florida _	Zin Colle

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Zip Colle

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
<del></del>		<del></del>	DAdd
			□Remove
			□Change
			□Remove
			□Change
<del></del>			□ Add
			□Remove
			[] Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			☐ Change
<del></del>			□Add
			□Remove
			□Change

			<del></del>	<del></del>	<del></del>			<del></del> _
				*				
								<del></del>
				<del></del>		<del></del>	_	
		<del></del>		<del></del>	<u></u>	<u>.</u>		
				- <del>-</del> -				
•	-						-	
-								
-	<del>-</del>				<del>_</del>		. <u>.</u>	_ <del>_</del>
•				<del></del>	<del></del>			
-	<del></del>				-	<del></del>		<del></del>
_		<del></del>				<u> </u>		<del></del>
-				<del></del>		<u></u>		<del></del>
_	<del></del>							
_		<u> </u>						
Fffort	ivo dota if us			5-5-2021				
$f$ $= e^{\frac{\pi}{4}}$	ive date, if oth	ed, the date coust l	<u>ne specific and c</u>	annot be prior to	date of filing or mo	- 1 than 00 I c	<b>itional)</b> Pursua	nt to 605,0207 (
docum	nent's effective	date on the Dep	artinent of Sta	et the applicable te's records.	e statutory filing	requirements, t	his date will no	t be listed as t
ra is m	ica.				, at 12:01 a.m. o			lay after the
	N 5-1	3-2021	· · · · · · · · · · · · · · · · · · ·		ed representative c			
Dated <sub>.</sub>	Į.	11						

Typed or printed name of signee