# L21000007090

(Req	uestor's Name)	
(Add	ress)	
(Addi	ress)	
(City)	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	me)
(Doc	ument Number)	)
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



800419221238

11/21/23--01032--004 ++25.00

SECRETARY OF STATE

2023 NOV 21 AM 9: 1



#### **COVER LETTER**

TO:	Registration Division of C	e Section Corporations					
SHRU		eball and Softball Private Lessons	LLC				
SUBJECT:Name of Limited Liability Company							
The en	nclosed Articles	s of Amendment and fee(s) are sub	mitted for filing.				
Please	return all corre	espondence concerning this matter	to the following:				
		Stephanic Goebel					
			Name of Person				
		ZenBusiness Inc.					
		Austin, TX 78731					
			City/State and Zip Code				
		fulfillment@zenbusiness.co	m				
		E-mail address: (	to be used for future annual report notifi	cation)			
For fu	rther informatio	on concerning this matter, please c	all:				
Stephanie Goebel c/o ZenBusiness Inc.			844 493-6249 at ( )				
	Nar	ne of Person		Telephone Number			
Enclos	sed is a check f	or the following amount:					
<b>■</b> \$2	25.00 Filing Fee	e \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

F2

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SR Baseball and Softball Private Lessons LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records nited Liability Company)	<u>.</u> )
The Articles of Organization for this Limited Liability Com	pany were filed on 12/29/2020	and assigned
florida document number 1.21000007090		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	
Principal office address MUST BE A STREET ADDRES.	<u> </u>	
		2023 ALLI
		NON YEAR
inter new mailing address, if applicable:		SS No Z
Mailing address MAY BE A POST OFFICE BOX)		
		10 S
		5. <b>9.</b> ()
<ol> <li>If amending the registered agent and/or registere egistered agent and/or the new registered office address</li> </ol>		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<del></del>		rida
	City	Zip Code

#### 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.

If Changing Registered Agent, Signature of New Registered Agent

## 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>	<u>Name</u>	Address	Type of Action
AMBR	Tania Agosto Diaz		□ Add
		200 North Boulevard West Davenport, FL 33837-8580	Remove
			☐ Change
MGR	Semiasis Rivera Figueroa	200 North Boulevard West Davenport, FL 33837-8580	Add
		•	Remove
			Change
			☐ Add
			Remove
			□ Change
		<del></del>	□ Add
			☐ Remove
			Change
			☐ Remove
			☐ Change
<del></del>			Add
			□ Remove
			□ Change

ii ameno	ling any other informati	on, enter cu	ange(s) nere.	(Anach adam)	mai sneeis, ij	necessary	v. <i>)</i>		
						<del></del>			•
					<del></del>		<del></del>		
			<del></del>						
								<del></del>	
		<del></del>							
						,			
						<del></del>			
				****					
<del></del>									
							-		
			<del>-</del>				·	<del></del> -	
				<del></del>	· · · · · · · · · · · · · · · · · · ·				
<del></del>							<del></del> .		
Effective	date, if other than the d	ate of filing:	<del></del>		((	optional)			
Note: If t	we date is listed, the date must the date inserted in this blocks effective date on the Dep	k does not me	et the applicab	ole statutory filing	ore than 90 days g requirements	this date	) Pursuar will not	n to 605 be liste	.0207 ( ed as t
ne record The 90	d specifies a delayed of th day after the recor	effective da d is filed.	ite, but not	an effective t	ime, at 12:(	01 a.m. (	on the	earlie	er of:
No Dated	vember 12		2023						
	/s/ Semiasis Rivera Figu	ieroa		•			SECAL	2023 NOV 2 1	
	S	ignature of a me	ember or authori	zed representative	of a member		HARY OF	3 AC	 
							SS	_	•
	Semiasis Rivera Figueroa						लेट	700	
	Semiasis Rivera Figueroa		'yped or printed	name of signee	···		E PLOGRA	AM 9: 16	

Page 3 of 3

Filing Fee: \$25.00