L21000024449

(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: Receive through emoul 10/14/22
Member Signature

Office Use Only

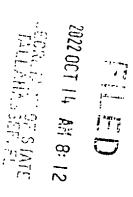


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A. BUTLER 0CT 1 / 2022



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BFIT	T Athletic Training LLC 2022 ADD
(Name of the Limited Lia (A Flo	bility Company as it now appears on our records.)
The Articles of Organization for this Limited Liabilit	y Company were filed on
Florida document number L21000024449	
This amendment is submitted to amend the following	:
A. If amending name, enter the new name of the l	imited liability company here:
	FI Pro LLC
The new name must be distinguishable and contain the words	.imited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registe agent and/or the new registered office address her	red office address on our records, <u>enter the name of the new registere</u> e:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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 adde or removed from our records:

MGR = . Manager AMBR = Authorized Member

<u>Tiţle</u>	<u>Name</u>	Address	Type of Action
			□Change
			□Add
			□Remove
			□Change
 -			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Change

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D. (If amending any other information, enter change(s) here: \(\text{\$\psi_{inh}h_{
	1.22.2022 at 12.01am
į	(optional) (a) Section of the date of filing: (b) Section of the date of filing: (c) Section of the section
	a series of the best normal the applicable statutory filing requirements, this date will not be listed as the series of the Department of State's records
	$m_{\rm color} \approx 500$ GeV and effective date, but not an effective time, at 12:01 a.m. on the earlier of $m_{\rm color} \approx 0.01$. Since the record is filed.
	Britains Hattis

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Exped or printed name of signee

Filing Fee: \$25.00



April 25, 2022

BFITT ATHLETIC TRAINING LLC 1140 CAPITAL CIR SE SUITE 13-B TALLAHASSEE, FL 32301 US

SUBJECT: BFITT ATHLETIC TRAINING LLC

Ref. Number: L21000024449

We have received your document for BFITT ATHLETIC TRAINING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 722A00009555

Anissa Butler Regulatory Specialist II