L21000520657

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A. BUTLER JAN 12 2023

	Registration Se Division of Cor			
2110 1074		ofessional Soccer LLC		
SUBJEC	T:	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please reti	urn all correspo	ndence concerning this matter	to the following:	
		Jena Kaufman		
			Name of Person	
		Moss & Barnett		
			Firm/Company	
		3800 Eighth Street N., Sui	te 102	
			Address	
		St. Cloud, MN 56303		
			City/State and Zip Code	
		jena.kaufman@lawmoss.co	m to be used for future annual report noti	fication
For furthe	r information co	oncerning this matter, please ca	•	
Jena Kau			320 654-4583	
	Name of	f Person	at () Area Code Daytim	e Telephone Number
Enclosed	is a check for th	ue following amount:		
≅ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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

DocuSign Envelope ID: E12EFA67-0826-4600-AE82-A62544ECF398 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2022 DCT 20 PI; 2: 56

Sarasota Professional Soccer LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited L	Liability Company)	1 0 2021	73700
The Articles of Organization for this Limited Liability Company	were filed on Decen	nber 9, 2021	and assigned
Florida document number L21000520657			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:	:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the desig	nation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		····	
(Principal office address MUST BE A STREET ADDRESS)	 		***
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	 		
B. If amending the registered agent and/or registered office a	ddress on our reco	rds, <u>enter the nan</u>	ie of the new registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			
Name of New Registered Agent.	-	 	
New Registered Office Address:	(7 . PT .)	street address	
	Enter Piorida	street adaress	
		, Florida	Zip Code
	City		Σφ Cude
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my	duties, and I am	familiar with and

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.

DocuSign Envelope ID: E12EFA67-0826-4600-AE82-A62544ECF398
It amenting Authorized rerson(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
MGR	Kenneth Bethune	117 N. Washington St, Beeville, Tx 78102	≣Add
			□Remove
			□Change
			🗆 🗀 Add
			□Remove
			[]Change
			🗆 🗆 🗆 🗆
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			□Change

 If amending any other informa 	,	,, y	, ,
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. Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the Defeat	at be specific and cannot be prior to ock does not meet the applicab	date of filing or more than 90 days as	otional) fler filing.) Pursuant to 605,0207 (3)(b this date will not be listed as the
the record specifies a delayed effective cord is filed.	e date, but not an effective time	e, at 12:01 a.m. on the earlier of:	(b) The 90th day after the
Dated October 10	2022	.•	
OocuSigned by:			
90CEA0754390433 , ~	Signature of a member or authoriz	zed representative of a member	
Marcus Walfridson			
	Typed or printed	name of signee	

Filing Fee: \$25.00