6/4/36, 1:38 PM **Division of Corporations** 

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Division of Corporations

Fax Number : (850)617-6383

## From:

Account Name :

Account Number : I20090000081

Phone

Fax Number : (813)436-5206



\*\*Enter the email address for this business entity to be used for future 백일을annual report mailings. Enter only one email address please.\*\*

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CORKUM HOCKEY ACADEMY LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

JUN - 5 2025

Electronic Filing Menu

Corporate Filing Menu

Help

If Changing Registered Agent, Signature of New Registered Agent

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

E025 JUN-4 AM II: 45

FALLAHASSEE FLORID!

Corkum Hockey Academy LLC

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

The Articles of Organization for this Limited Liability Company	were filed on Oaizoizo	and assigned
Florida document number L25000151185	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here;	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LI	C" or the abbreviation "L.I.,C,"
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	8269 NW 127th lane	
(Mailing address MAY BE A POST OFFICE BOX)	parkland FI 33076	
Maning universe MAT DE AT OUT WITHER DO.Y		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	ddress on our records, ente	r the name of the new registered
		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Fire and Parish and the Land	
New Registered Office Address:	Enter Florida street addre	
New Registered Office Address:		
New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent:		loridaZip Code

Jun 04, 2025 10:39 • t To: +18506176383 Page 3/4 Fax 1813436

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
AMBR	Soden Corkum	B269 NW 127th lane	
		parkland fl 33076	□Remove
			□Change
			□Add
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Effective date, if other than the	date of filing:		(optional)	
If an effective date is listed, the date mus <u>Note:</u> If the date inserted in this bl document's effective date on the D	st be specific and cannot be prior ock does not meet the applic	to date of filing or more than able statutory filing requir	90 days after filing.) Pursuar	
e record specifies a delayed effectiv rd is filed.	e date, but not an effective ti	me, at 12.01 a.m. on the c	arlier of: (b) The 90th d	ay after the
Dated June 4th	2025			
	Val Signature of a member or author	- -m-i1-h	urar.	

Typed or printed name of signee