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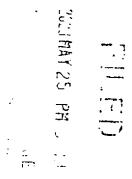
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7/19/23 VW



Chanin Griffin
407-427-4769
15031 Moultrie Pt Rd
Orlando, FL, 32808

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corpora	tions		
SUBJECT:	- Sport	5 L. L. C.	
The enclosed Articles of Amer	ndment and fee(s) are sub	mitted for filing.	
		-	
Please return all correspondence	te concerning this matter	to the following:	
_	<u>Ea</u>	1 mamule	en
	_	Name of Person	
_	\overline{T}	Firm/Company	LLC
_	2721 F	Forsyth Roal	1 # 200
_		ter Parkit	
	E-mail address: (i	City/State and Zip Code MS 4 Sports to be used for future annual report	ayahvo, com
For further information concern	ning this matter, please ca	ıll:	,
Clavin Gr	. Phy	at (401) 4	274769
Name of Perso	on	Area Code Day	time Telephone Number
Enclosed is a check for the foll	owing amount:		
☑ \$25.00 Filing Fee □	\$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: Registration Section	an .	Street Address	
Division of Corpor		Registration Division of O	
P.O. Box 6327			of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	any as it now appears on	our records.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L0300006530</u> .	4	101/03	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the design	ation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:		•	e e	
Principal office address MUST BE A STREET ADDRESS)		-		
	· · ·			
		-	ch :	
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)			•	
Maning matrices man be at 1051 Of Fice Body			<u> </u>	
3. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	, Florida			
	City	, 1 101104	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
hereby accept the appointment as registered agent and agr rovisions of all statutes relative to the proper and complete ccept the obligations of my position as registered agent as p eing filed to merely reflect a change in the registered office ompany has been notified in writing of this change.	performance of my a provided for in Chap	luties, and I am fa ter 605, F.S. Or, if	miliar with and This document is	
ompany nas been notified in writing of this change.				

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

Title	<u>Name</u>	Address	Type of Action
<u>CEO</u>	Chanin Griffin	2721 Forsyth Rd #200 Winter Park, F1 32792	XiAdd
			Remove
			□Change
Pres_	Earl McMullen	2721 Forsyth Rd #200	☐Add
		2721 Forsyth Rd #200 Winter Park, Fl 32795	[XRemove
			□Change
			□Add
		~ ~~ .	□Remove
			□Change
			□Add
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			Change

					
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ffective date, if	other than the date of	filing:		(optional)	
	isted, the date must be speci serted in this block does				
ocument's effectiv	e date on the Departmen	it of State's records.			
	dalamad officeries data to			t and a spin	00.1 1 6 .1
l is filed.	delayed effective date, b	ut not an effective time	, at 12:01 a.m. on the	earlier of: (b) The	90th day after the
. Λ .	. 6	2. 22			
Dated Ma	<u>4</u> 2	2023 Multiple of a member or authorize			
	= E 000	-0011			
	Signature	e of a member or authoriz	ed representative of a m	ember	 _
		Typed or printed r			
	<u></u>	71 1/21	nuner		

Filing Fee: \$25.00