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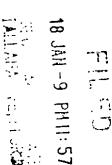
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:
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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
	Ice Sports	Forum, LLC		
SUBJECT:	-	Name of Lim	ited Liability Company	1
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
			-	
riease return	an correspo	ndence concerning this matter	to the following.	,
		Thomas B. Bradley		
			Name of Person	
		Ice Sports Forum, LLC		ı
			Firm/Company	
		5012 W Cypress Street		
			Address	<u> </u>
		Tampa, Florida 33607		
			City/State and Zip Code	
		denise@hgm-group.com		
		E-mail address: (to be used for future annual report notific	cation)
For further in	nformation c	oncerning this matter, please ca	all:	
Denise Bra	dley		813 287-1731	
	Name o	f Person		Telephone Number
Enclosed is a	a check for th	ne following amount:		
□ \$25.00 F	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)
	Registr Divisio P.O. Be	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	tions ter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ice Sports Forum, LLC			1
(Name of the Limited L (A F	iability Compa lorida Limited	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Liabil Florida document number L03000057193			and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	limited liab	ility company here:	
lce Sport Management, LLC			
The new name must be distinguishable and contain the words	"Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	N/A	<u> </u>
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:		N/A	3 3
(Mailing address MAY BE A POST OFFICE BO)	<u>X)</u>		22. u
Name of New Registered Agent:	address her		records, enter the name of the new
New Registered Office Address:	√A 	Enter Florida stre	et address
		1,2,4,6,1,1,0,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1	
-		City	, Florida Zip Code
New Registered Agent's Signature, if changing Regi	stered Agent:	<u>.</u>	
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a secon tne obligations of my position as register being filed to merely reflect a change in the region company has been notified in writing of this cha	gent and agr and complete ed agent as istered office	ree to act in this capaci performance of my du provided for in Chapte	ties, and I am familiar with and r 605, F.S. Or, if this document is
	If Cha	nging Registered Agent, Sig	nature of New Registered Agent
			1
	_		

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

1

AMBR =	Authorized Member	1	
<u>Title</u>	Name	Address	Type of Action
	N/A		
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			Сһалде
			[] Add
			□ Remove
			Change
			A 28 T
			☐ Remove
			Change ,
			CT 7 7 Add
			□ Remove
			☐ Change
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ctive date, if other than the	date of filing:	(0	optional)
effective date is listed, the date must	be specific and cannot be prior to date	of filing or more than 90 days	after filing.) Pursuant to 605.
If the date inserted in this bloment's effective date on the De	ock does not meet the applicable st partment of State's records.	atutory filing requirements,	, this date will not be liste
ecord specifies a delayed	effective date, but not an	effective time at 12:0	।)1 å m on the earlie
e 90th day after the reco		onedayo dimo, de 12.0	or the curic
, January 4	2018		
d 1			
d	0 0 /// 10		
Throng b.	3. Burlle		
Though	Signature of a member or authorized	epresentative of a member	

Page 3 of 3

Filing Fee: \$25.00