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JUL 28 2009

EXAMINER

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2009 JUL 27 PM 2: 38
SECRETARY OF STATE
TALLAHASSEE, FI GRID.

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Sports Chix LLC Name of Limited Liability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Anthony Fordyce Name of Person		
Anthony Fordyce Name of Person Sportschu LLC Firm/Company	2009	
2850 Tringlemy Ide Dr. Address Address	2009 JUL 27 PM 2: 38	
City/State and Zip Code	₽	
City/State and Zip Code FORDYADLE GMAIL "COT E-mail address: (to be used for future annual report notification)	2: 38	
For further information concerning this matter, please call:		
Anthony Fordige at (Ci3) 909-2077 Name of Person at (Ci3) 909-2077 Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: STREET/COURIER ADDRESS:		

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp	nony os if now annears on our records
(A Florida Limited	pany as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Compan	ny were filed on $\frac{7/23/09}{}$ and assigned
Florida document number <u>LO 700009969</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
The new name must be distinguishable and end with the words "Lir"L.L.C."	mited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	72005
(Principal office address MUST BE A STREET ADDRESS)	CRETAL 2
	ASA N
	NY OSEE.
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	\$ 72. COR
	38 DA
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	office address on our records, <u>enter the name of the never</u> e:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = M	lanaging Member		
Title	<u>Name</u>	Address	Type of Action
<u>MGRM</u>	Leslep LAZEY	2713 West Braddock Tampa, FL 33667	Add Remove
			Add Remove
			Add Remove
			SE AND RESOVE
			27 PARAGOVE D
			DE 39 Add Remove
D. If amend	ling any other information, enter c	change(s) here: (Attach additional sheets, if necessa	
Dated	7/23/09 .	·	
		ember or authorized representative of a member Y Fordy & Exped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00