

6/6/13

**L070000014716**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H13000127796 3)))



H130001277963ABC3

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : PAUL E. GHOUGASIAN, P.A.  
Account Number : I20100000012  
Phone : (561) 391-4700  
Fax Number : (561) 391-4766

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

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
BOCA SPORTS STARS CAMP, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	<b>\$25.00</b>

RECEIVED  
13 JUN -6 PM 4:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
13 JUN -6 AM 7:44  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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

H13000127796 3

**BOCA SPORTS STARS CAMP, 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 February 5, 2007  
Florida document number L07000014716

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
JUN -6 AM 7:4

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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 address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip Code

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

H13000127796 3

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:

H13000127796 3

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Asst Mgt	Kathy B. Pokela	22272 Timberly Drive	<input type="checkbox"/> Add
		Boca Raton, FL 33428-3832	<input checked="" type="checkbox"/> Remove
Mgr	Kathy B. Pokela	22272 Timberly Drive	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33428-3832	<input type="checkbox"/> Remove
Mgr	Kirk S. Pokela, Jr.	22272 Timberly Drive	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33428-3832	<input type="checkbox"/> Remove
Mgr	Wayne Pokela	22272 Timberly Drive	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33428-3832	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATION  
 13 JUN - 6 AM 7:44  
 Remove

H13000127796 3

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated June 3, 2013.

Kathy B. Pokela

Signature of a member or authorized representative of a member

Kathy B. Pokela, Manager

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 JUN -6 AM 7:44

H13000127796 3