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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

D. BRUCE

DEC 11 2009

EXAMINER

COVER LETTER

Division of Corporations						
SUBJECT: ELITE FASTPITCH TRAINING & CONDITIONING 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:						
Name of Person ELITE FAST PITCH TRAINING & CONDITIONING, LLC Firm/Company						
1600 SE 4h CT Address						
Definition BEACI FI 32441 City/State and Zip Code Micastin + Obellso TH. NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: TED MICASTIN. at (954) L75-0719 Name of Person Area Code & Daytime Telephone Number						
For further information concerning this matter, please call:						
Name of Person at (954) 675 - 0719 SEE SEE SEE SEE SEE SEE SEE SEE SEE SE						
Enclosed is a check for the following amount:						

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Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

\$30.00 Filing Fee &

Certificate of Status

\$25.00 Filing Fee

TO:

Registration Section

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

STREET/COURIER ADDRESS:

\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELITE FASTPITCH TRAINING L CONDITIONING, 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 _ Florida document number <u>107000055</u> 71 5 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 "L.L.C." 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: MURASKIN. New Registered Office Address:

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

s ;	If amending to or Managing l	ss of each Manager					
	AGR = Manager AGRM = Managing Member						
	<u>Title</u>	<u>Name</u>	Address	Type of Action			
•	MGR	JULIETTE LANCASTER - BROUKS	1845 PAIM COVE BLUD. \$8-108, DELRAY BEACH FL. 33445.	Add ∑ Remove —			
!	MGR	TED MURASKIN	1000 SE YA CT DEENFIGLD BEACH FI 33441	Add Remove			
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J	D. If amendin	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	>			
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			FLORIDA	LED AHH: 49			
1	Dated						
	_	-	r authorized representative of a member				
		TED MURASK	r printed name of signee				
		I yped or	r printed name of signee				

Page 2 of 2

Filing Fee: \$25.00