000002739

(R€	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
		,
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	, ,
•		

Office Use Only



200120777542

03/31/08--01015--012 **25.00

2008 MAR 31 PM 12: 08
SECRETARY OF STATE
SECRETARY OF STATE

T. CLINE

APR - 1 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co					
SUBJECT: Pro Kic	kers Academy LLC				
	(Name of Lin	nited Liability Company)			
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
	Michael S. Hollis		w 101 - 1110 / 1200 - 100b		
		(Name of Person)			
	Pro Kickers Academ	y LLC			
		(Firm/Company)	 		
	124 Sawbill Palm Dr				
		(Address)		75 ZES	
	Ponte Vedra Beach	, FL. 32082		ECR ECR	1
		(City/State and Zip Code)		ETA 3	*********
For further information	concerning this matter, please of	eall:	•	2008 HAR 31 PM 12: 08 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Michael S. Hollis		at (904) 346-3946		2: 0 PRI PRI	
	e of Person)	(Area Code & Daytime	Telephone Number) Dri 8	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	
MAJI	LING ADDRESS:	STREET/COURIER	R ADDRESS:		

MAILING 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

Pro Kickers Academy LLC		
(Name of the Limiter	Liability Company as it now appea A Florida Limited Liability Company)	ers on our records.)
(A	trional miner many company)	
The Articles of Organization for this Limited L	iability Company were filed on 10	0/09/07 and assigned
Florida document number L07000102739		
	·	
This amendment is submitted to amend the foll	lowing:	
This amendment is submitted to amend the for	lowing.	
A TO 11	# A 10 10 10 10 10 10 10 10 10 10 10 10 10	
A. If amending name, enter the new name of	of the limited liability company he	re:
ProForm Kicking Academy LLC		
The new name must be distinguishable and end w "L.L.C."	th the words "Limited Liability Comp	
L.L.C.		CARET TO
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 o	nice address nere:	mor Pr
		PM 12: 08 PM 12: 08 E. FLORID
Name of Name Desired Assets	Randi Fordham	RIDE 08
Name of New Registered Agent:	Ranui Foldiiaiii	7
New Registered Office Address:	1241 McDuff Avenue Sou	th
	(E	Enter Florida street address)
	Jacksonville	, Florida 32205
	(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.

In Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = N MGRM =	Aanager · · · · · · · · · · · · · · · · · · ·		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
	The contraction of the contracti		Add Remove
			Add Remove
	<u></u>		Add Remove
	<u></u>		ARE Remove
***************************************			FLORIDA Remove
<u>,</u>	Would like to change address of		y.)
_	3605 Philips Hwy, Jacksonville,	,	
-	New address for ProForm Kickin 124 Sawbill Palm Dr., Ponte Ved		
Dated <u>Ma</u>	my S	2008 AAA	
	Michae	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00