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A. LUNT
JUN 1 7 2009

EXAMINER

## **COVER LETTER**

	Re <del>g</del> istration S Division of Co						
SUBJEC	T:	Next Level Football, LLC  Name of Limited Liability Company					
302020							
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please ret	turn all corresp	ondence concerning this matter	to the following:				
			Catherine D. Inman				
			Name of Person		and .		
		Ne	ext Level Football, LLC		ALC:	Ĭ	
			Firm/Company		28	2023 EN 16	
	715 Tides Road				ARY	5	
ſ			Address		FO	<b>₽</b>	T
		V	ero Beach, FL 32963		SIAI	PM 12: 09	
		VII	City/State and Zip Code		- Om	<b>5</b>	
			evelfootball@comcast.n				
For furthe	er information	concerning this matter, please c	to be used for future annual reportall:	nouncanon)			
	Cath	erine D. Inman	at (_ 772 )	234-0692			
	Name	of Person		aytime Telephone Numb	oer		
Enclosed	is a check for	the following amount:					
\$25.00	0 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	Certific losed) Certific	filing Fee, cate of Statu ed Copy onal copy is		osed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration S Division of C Clifton Buildi	orporations ing ve Center Circle				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ne	xt Level Football, LLC		
( <u>Name of the Limited L</u> (A F	iability Company as it now apper lorida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liab Florida document number	· · ·	May 29, 2009	and assigned
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	he limited liability company he	ere:	Zee Jun
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Comp	pany," the designation	C" The ab reviation
Enter new principal offices address, if applicab	le:	L 0	N D
(Principal office address MUST BE A STREET	ADDRESS)	<u> </u>	. <b></b> .
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter th	e name of the nev
Name of New Registered Agent:		···	<del></del>
New Registered Office Address:			
		nter Florida street addr	2SS
		, Florida	
	City		Zin 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 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 = Manager

MGRM = N	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	William Motta	715 Tides Road Vero Beach, Fl. 32963	Add Remove
MGRM_	Catherine D. Inman	715 Tides Road Vero Beach, FL 32963	✓ Add ☐ Remove
<del></del>			Add Remove
			SECRET TANK
		E. FLORID	S Bodd C Remove
			AddRemove
D. If amend	ding any other information, enter c	hange(s) here: (Attach additional sheets, if necessary	 .)
Dated	June 11 ,	2009	
	larl -	Pall	
	•	ember or authorized representative of a member	
		R. Motta / Catherine D. Inman	

Page 2 of 2

Filing Fee: \$25.00