

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

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Division of Corporations

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

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LEC AMND/RESTATE/CORRECT OR M/MG RESIGN GOLF PRODUCTS INVESTMENTS, LLC

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COVER LETTER

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TO: F	Registration 8 Division of Co	ection rporations	· ·	(() () ()	
		ODUCT INVESTMENTS LL	C		
SUBJECT	Γ:	Name of Lir	nited Liability Company		
		Amendment and fee(s) are substitution of the s	·		
2.5500 }		MAX A. ADAMS, ESQ	i de les logionnes		
			Name of Person		
LAW OFFICES OF MAX A. ADAMS, ESQ. PLLC					
	Finn/Company				
	2151 S. LEJEUNE ROAD, STE. 306				
			Address		
		CORAL GABLES, FLOR	IIDA 33134		
		INFO@THEMEDILAWF	City/State and Zip Code IRM,COM		
		E-mail address:	to be used for fidure amual report notif	leation)	
For further	information c	oncerning this matter, please o	oll:		
ANGELA	PEREZ		305 444-3484		
	Name o	f Person		Telephone Number	
Enclosed is	s a check for th	ne following amount:			
\$25,00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Pee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Pee, Cortificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOLF PRODUCTS INVESTMENTS LLC		
(Name of the Limited Lizitili (A Florida	ty Company as it now appears on our rec. Limited Liability Company)	orda.)
The Articles of Organization for this Limited Liability C Florida document number <u>L11000085572</u>	Company were filed on	and assigned
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the lim	ited abii ty company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	Martin Company and the self-content of the sel
Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered	tered office address on our reco	rds, enter the name of the new
registered agent and/or the new registered office addi	ress here:	
Name of New Registered Agent:	····	
New Registered Office Address:		
	Enter Florida street add	PASS .
	C/ty	Florida
New Registered Agent's Signature, if changing Registered		zip Code
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and confidence the obligations of my position as registered agent the obligations of my position as registered agent being filed to merely reflect a change in the registere company has been notified in writing of this change.	and agree to act in this capacity. I omplete performance of my duties, pent as provided for in Chapter 60: d office address, I heraby confirm to Changing Registered Agent, Signature	and I am familiar with and 5, F.S. Or, If this document is that the limited Habilion
	Page 1 of 3	

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(II)

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>		Address	Type of Action
AP	MARK AMUSO		2885 JUPITER PARK DR	Add
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			JUPITER, FLORIDA 33458	Change
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ctive date, if other than t	he date of filing:	(option	al)
: If the date inserted in this	: block does not meet the applicable statut	ling or more than 90 days after till ory filling requirements, this d	ing.) Pursuant to 605.02 are will not be listed :
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ment's effective date on the ecord specifies a delay ne 90th day after the n	ecord is filed.	ective time, at 12:01 a.r	M. OFFICE CAPE
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