

L1100001434800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600354524106

10/30/20--01008--011 **55.00

2020 OCT 30 PM 1:41

2020 OCT 30 AM 9:14
CLERK OF STATE
TALLAHASSEE, FL

FILED

10/30/20

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Carr Sports Consulting LLC

Signature _____

Requested by: SETH

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

172 Pender & Printing • Tallahassee, FL 32301

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CARR SPORTS CONSULTING, 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:

CHARLES I. HOLDEN, JR.

Name of Person

HOLDEN, CARPENTER & ROSCOW, PL

Firm/Company

5608 NW 43rd Street

Address

Gainesville, FL 32653

City/State and Zip Code

curtis@athleticcareerspear.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles I. Holden, Jr.

352 377-5900
at ()

Name of Person

Area Code

Daytime Telephone Number

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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

CARR SPORTS CONSULTING, 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 12/22/2011 and assigned
Florida document number L11000143480

This amendment is submitted to amend the following:

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

ATHLETICS CAREER SPEAR, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

3301 NE 32nd Avenue

(Principal office address MUST BE A STREET ADDRESS)

Apt. 404

Ft. Lauderdale, FL 33308

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:

WILLIAM C. CARR IV

New Registered Office Address:

3301 NE 32nd Avenue, Apt. 404

Enter Florida street address

Ft. Lauderdale


City

Florida 33308

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 605, 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

FILED

2010 OCT 30 AM 9:4

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	WILLIAM C. CARR, III	3602 NW 46th Place	<input type="checkbox"/> Add
		Gainesville, FL 32605	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	JANICE J. CARR	3602 NW 46th Place	<input type="checkbox"/> Add
		Gainesville, FL 32605	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	WILLIAM C. CARR, IV	3301 NE 32nd Avenue	<input checked="" type="checkbox"/> Add
		Apt. 404	<input type="checkbox"/> Remove
		Ft. Lauderdale, FL 33308	<input type="checkbox"/> Change
MGRM	MORGAN L. CARR	3301 NE 32nd Avenue	<input checked="" type="checkbox"/> Add
		Apt. 404	<input type="checkbox"/> Remove
		Ft. Lauderdale, FL 33308	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2020 OCT 30 AM 9:14
FILED
CLERK OF DISTRICT COURT
NORTH DARIEN COUNTY

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

דעם

2020 OCT 30 AM 9:14

E. Effective date, if other than the date of filing: November 1, 2020 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated October 30 2020

Signature of a member or authorized representative of a member

WILLIAM C. CARR, III

Typed or printed name of signer

Filing Fee: \$25.00