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D. TRUCE

# **COVER LETTER**

TO: Registration Section
Division of Corporations

Suncoast Premier League, 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:

Amy J. Galloway

Name of Person

Amy J. Galloway, PA

Firm/Company

1401 East Broward Blvd., Suite 206

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

amyjgalloway@gmail.com

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

For further information concerning this matter, please call:

Amy J. Galloway

<sub>31</sub>,954, 31**5-48**87

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, Ft. 32314

### STREET/COURIER ADDRESS:

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

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

## SUNCOAST PREMIER LEAGUE, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(7	Tronda Emined Elabinity Company)			
The Articles of Organization for this Limited L. Florida document number <u>L13000050298</u>	iability Company were filed on Al	oril 5, 2013 and as	ssigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	f the limited liability company he	ere:		
SUNCOAST PREMIERE LEAGUE, L	.LC			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Comp	pany," the designation "LLC" or the	abbreviation	
Enter new principal offices address, if applie	eable:			
(Principal office address MUST BE A STREE	ET ADDRESS)	·		
		<u>&gt;</u> ∰	N T	
Enter new mailing address, if applicable:		1	TO docume	
(Mailing address MAY BE A POST OFFICE	BOX)	<u>m</u>		
			7 11	
B. If amending the registered agent and/or the new registered of	or registered office address on ffice address here:	عوبق مهم	the new	
Name of New Registered Agent:				
New Registered Office Address:	1401 East Broward Blvd.	, Suite 206		
rewitegistered office radioss.	Enter Florida street address			
	Fort Lauderdale	, Florida <u>333</u> 01		
	City	Zip Coa	le	
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 = 1	Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Add
			Remove
			Add
			Remove
			38 88
			SSE Y
			Remove
			Add
			Remove
	<del></del>	<del></del>	Add
			Remove

. If amending any other information, e	nter change(s) here: (Attach ad	lditional sheets, if necessary.)
	Name at an	
		<del>*************************************</del>
September 11,	2013	
ated Geptermeer 11,	·	/
	Any T.	DL/Y
Signature o	of a member or authorized represer	ntative of a member
Amy J. Galloway		
<del></del>	Typed or printed name of sig	nee

Page 3 of 3

Filing Fee: \$25.00

TOTAL SEP 17 PM 4:07