L130000TUSUO

(Requestor's Name)				
(Address)				
Phone #)				
IT MAIL				
ty Name)				
(Document Number)				
ficates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600266641636

2015 FEB -6 PH 12: 30

TFB 0 9 2015), BRUCE

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

2/6/15

NAME:

TEAM ELITE ADVANCED MANAGEMENT AMERICA, LLC

TYPE OF FILING: AMENDMENT

COST:

55,00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	gistration Secti vision of Corpo					
OUD IE OF	TEAM Elite	e Advanced Managen	nent America, LLC			
SUBJECT:		Name of Limi	ited Liability Company			
The enclose	d Articles of Ar	nendment and fee(s) are sub	mitted for filing.			
Please retur	n all correspond	ence concerning this matter	to the following:			
		William Eilers				
			Name of Person	,		
		Eilers Law Group, P	.A.			
			Firm/Company			
		169 NE 43rd. Street				
			Address			
		Miami, FL 33137			201 AL	
			City/State and Zip Code			477
		wreilers@eilerslawgr	•		SY T	CPETITION
		·	to be used for future annual report notificat	ion)	. ΣΕΥ ο	
For further i	nformation con-	cerning this matter, please ca	all:		PH S	
William E	Eilers		786 273-9152		PH 12: 30 OF STATE FLORIDA	Secure of
	Name of P	erson	Area Code Daytime Te	lephone Number	- 25 11 - C	
Enclosed is	a check for the	following amount:				
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Standard Sta	Sectificate of Certificate of Certified Contact (additional contact)	of Status &	

MAILING ADDRESS:

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

TEAM Elite Advanced Management America, 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 w	ere filed on 05/28/2013	and assigned
Florida document number <u>L13000076860</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
TEAM Sports International LLC		
The new name must be distinguishable and end with the words "Limited Liability	ty Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		~···
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	·	T T
		55
B. If amending the registered agent and/or registered office		
registered agent and/or the new registered office address here:	te address on our records, enter t	ile nametal memer
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree		
provisions of all statutes relative to the proper and complete pe accept the obligations of my position as registered agent as pro		

If Changing Registered Agent, Signature of New Registered Agent

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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Auth	norized Member		
Title	Name	Address	Type of Action
			□ Add
			☐ Remove
			□ Add
			
			Add
			□ Remove
			2015 FEB - 6 PROPY Remove 2: 30
			Remove
			D: 30
			□ Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove
			□ Add
			_ Remove

If amending any other information, enter change(s) here: (Attack)	ch additional sneets, if necessary.)
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date at the date this document is filed by the Florida Department of State)	(optional) Ind cannot be more than 90 days after
Dated February 5th , 2015	_
	7
Signature of a member or authorized lep William Eilers	esentative of a member
Typed or printed name of	t cianea

Page 3 of 3

Filing Fee: \$25.00

