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SECREJARY OF STATE
TALLAHASSEE, FLORIDA

NI Amend

COVER LETTER

| Division of Corporations | | |
|---|--|---------------------|
| SUBJECT: International Sports Finding 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: | | |
| Frank Banbonin | | |
| | | |
| Firm/Company | | |
| | | |
| 16 Stenersen Lane Address | | |
| Cocheysville, mo 21030 City/State and Zip Code Phanhacino e laxworld. Com E-mail address: (to be used for future annual report notification) | | |
| City/State and Zip Code | | |
| E-mail address: (to be used for future annual report notification) | Ä. | - ▲ |
| For further information concerning this matter, please call: | ECAE HECAE | |
| Frank Bank Milwo at (410) 561-7304 Name of Person Area Code & Daytime Telephone Number | HESS MEN MEN MEN MEN MEN MEN MEN MEN MEN MEN | л [³ |
| Name of Person Area Code & Daytime Telephone Number | | |
| Enclosed is a check for the following amount: | TATE | |
| (additional copy is enclosed) Certified | ite of Stati I Copy | us & senclosed) |

MAILING ADDRESS:

TO:

Registration Section

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

| International Sports F | unding, LLC | |
|--|---|--|
| (Name of the Limited Liability Compa (A Florida Limited I | ny as it now appears on our rec liability Company) | <u>cords.</u>) |
| The Articles of Organization for this Limited Liability Company Florida document number <u>LI3000081112</u> . | were filed on June 5th | 2013 and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | |
| The new name must be distinguishable and end with the words "Limi | | |
| The new name must be distinguishable and end with the words "Limi"L.L.C." | | |
| Enter new principal offices address, if applicable: | 16 Stenersen 1 | pre |
| (Principal office address MUST BE A STREET ADDRESS) | 16 Stenersen 1 Cocheysville, mo | 21030 3 |
| | | "Description of the control of the c |
| Enter new mailing address, if applicable: | 16 Stenersen L | -ANCHI |
| (Mailing address MAY BE A POST OFFICE BOX) | 16 Stenersen L Cocheysville, MO | 21030 REDE |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her | | s, enter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida | street address |
| | . F I | lorida |
| | City | 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 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.

| • | er information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| | Signature of a member or authorized representative of a member |
| | FRANK BARBARINO |
| | Typed or printed name of signee |
| | ryped of printed fiame of signee |

Filing Fee: \$25.00

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SECRETARY OF STATE
JALLAHASSEE: FLORIO