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## COVER LETTER

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TO:

Registration Section Division of Corporations

SUBJECT: Toley Family Enterprises, 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:
Michelle Berrard Name of Person
Firm/Company
3012 Conservancy Lane
Charleston SC 29414 City/State and Zip Code
Michelle. berrard @ Hotle boxing club. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michelle Berrard at (321) 231-5021  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25,00 Filing Fee \$\Bigcup \\$30,00 Filing Fee \& \Certificate of Status \$\Bigcup \\$60,00 Filing Fee. \$\Certificate of Status \& \Certificate of Stat
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Foley Family Enterprises, LLC

(A Florida Limited I	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 13000103600</u> .	were filed on July 22, 2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab  MRB Boxing LLC  The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	13506 Summerport Village Pkwy Windermere, FL 34786
(Principal office address MUST BE A STREET ADDRESS)	Windermere, FL 34786
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	Same as above.
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new register
Name of New Registered Agent:	:3 <del>2</del> 2
New Registered Office Address:	Enter Florida street address
	Florida 7
New Registered Agent's Signature, if changing Registered Agent:	City City City City City City City City
I hereby accept the appointment as registered agent and agree	ee 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

or removed from our records: MGR = Manager AMBR = Authorized Member Address 13506 Sunmerport Village Pkwy #339 <u>Title</u> Name 1 MGRI James Foley AMBR Windermere, FL 34786 JAdd Remove □ Change MGR Michelle Foley  $\square$ Add □Remove Michelle Berrara  $\square$ Add □Remove \_\_\_\_\_ □Change  $\Box$ Add □Remove □ Change  $\square$ Add □Remove \_ □Change □Remove □Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being a

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f an effective date i	f other than the date of slisted, the date must be spec	citic and cannot be pri	ior to date of filing or i	(option note than 90 days after	r <b>nal)</b> filing.) Pursuant to 605.0	)207
Note: If the date	inserted in this block doc tive date on the Departme	es not meet the app	licable statutory fili	ng requirements, this	date will not be listed	1 as
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e record specifies rd is filed.	a delayed effective date.	but not an effective	e time, at 12:01 a.m	on the earlier of: (b'	The 90th day after t	the
Dated Nove	ember 8	2021	<u> </u>			
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