

L14000131146

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TALLAHASSEE FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BYB EXTREME FIGHTING SERIES, 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:

Michael Vazquez

Name of Person

BYB EXTREME FIGHTING SERIES, LLC

Firm/Company

7355 NW 35 ST.

Address

MIAMI, FL 33122

City/State and Zip Code

michaelvazquez@bellsouth.net

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

For further information concerning this matter, please call:

Nicole Enos

305

604-9944

Name of Person

at ()

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAY 19 PM 3:01
TALLAHASSEE, FLORIDA

**TO
ARTICLES OF ORGANIZATION
OF**

BYB EXTREME FIGHTING SERIES, 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 08/21/2014 and assigned
Florida document number L14000131146

This amendment is submitted to amend the following:

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

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:

7345 NW 35 ST.

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33122

Enter new mailing address, if applicable:

7345 NW 35 ST.

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33122

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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 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
CLERK OF STATE
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA
AUG 21 19 PM 3 04

MGR = Manager
AMBR = Authorized Member

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAY 1961 PM 3:04
Change
Add
Remove
Change
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Blank lined area for text entry.

E. Effective date, if other than the date of filing: _____ (optional)

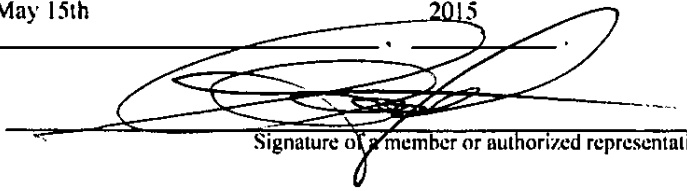
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 May 15th

2015



Signature of a member or authorized representative of a member

Michael Vazquez

Typed or printed name of signee

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