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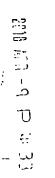
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March 23, 2018

EMILIANO CARDONA JR **504 W WARREN AVE** TAMPA, FL 33602

SUBJECT: GRACIE MARTIAL ARTS TAMPA LLC 723

Ref. Number: L14000157850

We have received your document for GRACIE MARTIAL ARTS TAMPA LLC 723 and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please revise page 1 of 3, and the hand writing is illegible.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

11.

Letter Number: 018A00005878

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gracie Martial Arts (Name of the Limited Liability Compar	Tampa LLC 923	
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{\angle/4000/57750}{}$	were filed on <u>/0/09/20/</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability of the limited liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name of the limited liability of the new name of the new name of the liability of the new name of th		abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	564 723 W. Co Tanpa FL	lumbus Dr. 33602
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Jumpa, FL. 336	1 Ave
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		the name of the new
Name of New Registered Agent:	<u>v</u> A	- 1
New Registered Office Address:	Enter Florida street address	<u>्र</u> जु
	. Florida	Či
	City , Florida _	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

MGR = Manager

AMBK =	Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Remove
			Change
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fective date, if other than the date of filing:	(optional)	ಎ್. -⊎೨
an effective date is listed, the date must be specific and cannot be prior to date of fiore: If the date inserted in this block does not meet the applicable statute.		
ocument's effective date on the Department of State's records.		
e record specifies a delayed effective date, but not an effe The 90th day after the record is filed.	ective time, at 12:01 a.m. o	n the earlier o
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00