From: Ana Perdomo Divisi of 2

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : GUZMAN & GUZMAN, P.A. Account Number : 120080000090 Phone ; (305)670-1991 Fax Number : (305)670-1993 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: LLC AMND/RESTATE/CORRECT OR M/MG RESIG AGC SPORTS LLC Certificate of Status 0 Certified Copy θ Page Count 01 Estimated Charge \$25.00

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Corporate Filing Menu

Help

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T. HAMPTON

3/18/2015

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a Perdomo	Fax: (306) 670-1991	To:	₽ Fa×: +1 (850) 617-6383 P	age 2 of,4 03/18/2015 1:24 PM
	9		S OF AMENDMENT TO OF ORGANIZATION OF	15 MAR 18 SECRETAR TALLAHAS
	AGC SPORTS L	LC		EF. A
The Artic	(<u>Nam</u>	e of the Limited Liabilit (A Florida	<u>y Company as it now appears on our</u> Limited Liability Company) company were filed on <u>11/20/20</u>	TRECORDED STAT
	ocument number L14000		'	
This ame	ndment is submitted to am	end the following		
			ed liability company here:	on "LLC" or the abbreviation "LLC
	w principal offices addre			
	l office address MUST BI		<u>ESS)</u>	
	w mailing address, if app address MAY BE A POST			
	mending the registered d agent and/or the new re		ered office address on our re ess here:	ecords, <u>enter the name of t</u> l
	Name of New Registered (Agent:		······································
		dress.		
	New Registered Office Ad		Enter Florida street	address
<u>i</u>	New Registered Office Ad	<u></u>		oddress , Florida Zip Code

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

Page 1 of 3

Authorized	Member being added or removed fro	om our records:	
MGR = N $AMBR = A$	Aanager Authorized Member		
Title	Name	Address	Type of Actic
MGR	BORGES, LISANDRO	9130 S DADELAND BLVD	Add
		STE 1509	Remove
		MIAMI FL, 33156	
MGR	NORA C. ARAMBARRI	9130 S DADELAND BLVD	Mad Mad
		STE 1509	Remove
		MIAMI FL, 33156	
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From: Ana Perdomo	Fax: (305) 670-1991	To:	Fax: +1 (850) 817-6383	Page 4 of 4 03/18/2015 1:24 PM		
		\$ \$				
	D. If amending any other information, enter change(s) here: (Attach additional sheets, if nece					
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	(The effective date m	if other than the date num be specific, cannot be p yent is filed by the Florida I	of filing; ariar in date of receipt or filed date and cann Department of Stale;	(optional) not be more than 90 disys ufter		
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	BOR	RGES, LISANDRO	ture of a niombal or authorized representat	live of a member		
			Typed or printed name of signee	,		

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15 MAR 18 AM 8: 26 SECRETARY OF STATE