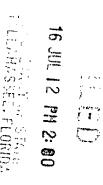
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(Requestor's Name)	
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COVER LETTER

TO: R	legistration Sec Pivision of Corp	tion orations		
CUD IE CO		rtial Arts LLC		
SUBJECT	·	Name of Limit	ed Liability Company	
The enclos	sed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please retu	ırn all correspor	dence concerning this matter to	o the following:	
Division of Corporations Modern Martial Arts LLC SUBJECT: Name of Person Modern Martial Arts LLC Name of Person Modern Martial Arts Modern Martial Arts Modern Martial Arts 656 E Hallandale Be Hallandale, Florida 3 info@modern-mma.cc E-mail add For further information concerning this matter, ple Nolberto Parra Name of Person Enclosed is a check for the following amount: \$\begin{align*} Subjects of Amendment and fee(s) are an expense of the partial and the partial Arts Nolberto Parra	Nolberto Parra			
		, , , , , , , , , , , , , , , , , , , 	Name of Person	/
		Modern Martial Arts LLC	Name of Person Firm/Company Slvd Address City/State and Zip Code to be used for future annual report notification)	
			Firm/Company	
		656 E Hallandale Beach Bl	lvd	
			Address	
		Hallandale, Florida 33009		
			City/State and Zip Code	
		info@modern-mma.com		
		E-mail address: (to	o be used for future annual report notific	cation)
For furthe	r information co	ncerning this matter, please ca	ll:	
Nolberto			305 938-0542 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	0 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Modern Martial Arts LLC			
(Name of the Limi	ited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L		were filed on	and assigned
his amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name o	of the limited liab	ility company here:	
he new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Inter new principal offices address, if appli	cable:	656 E Hallandale Beach Blvd	
(Principal office address MUST BE A STREET ADDRESS)		Hallandale, Florida 33009	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		656 E Hallandale Beach Blvd Hallandale, Florida 33009	
3. If amending the registered agent and egistered agent and/or the new registered o			iter the name of the ne
Name of New Registered Agent:	Nolberto Parra		25 N
New Registered Office Address:	656 E Hallanda	le Beach Blvd	7
		Enter Florida street address	
	Hallandale	, Florid	a 33009
		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

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 = M AMBR = A	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add
			□ Remove
			☐ Change
	**************************************	WELLOW THE	Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			JUN 22 SERVICE
			Remove
			hange
***************************************			□ Add
			☐ Remove
			☐ Change
			□ Add
		WALTER TO THE RESERVE	☐ Remove
			☐ Change

				·.)	
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				15/2	<u>=</u>
	07/04/2016			1.55	V2 ***
Effective date, if other than the offertive date is listed, the date must	late of filing:	date of filing or more than	(optional)) Pursuant	
Note: If the date inserted in this blo	ck does not meet the applicab	le statutory filing requir	ements, this date	will not	qe Jisted as
document's effective date on the De	partment of State's records.				90
he record specifies a delayed The 90th day after the reco	effective date, but not a	an effective time, a	t 12:01 a.m.	on the	earlier o
July 07	2016				
Dated					
		294		_	
	<i>\r</i>	1 - 1			
	Signature of a member or authori	1 - 1	nber		

Page 3 of 3

Filing Fee: \$25.00