L15000047212

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SECRETARY OF STATE
TALLAHASSEE FROME

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:		ER SCHOOL LLC		,
SOBJECT.		Name of Lim	ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		VITOR BORBA FERREII	RA, RIVALDO	
			Name of Person	
		R10 SOCCER SCHOOL L	LC	
			Firm/Company	
		4302 ISABELLA CIR		
		<u> </u>	Address	
		WINDERMERE, FL 3478	6	
		-	City/State and Zip Code	
		E-mail address: (to be used for future annual report not	ification)
For further in	formation co	oncerning this matter, please ca	ail:	
VITOR BOR	BA FERRE	IRA, RIVALDO		
Name of Person		at () Area Code Daytin	ne Telephone Number	
Enclosed is a	check for th	e following amount:		
≅ \$25.00 F	iling 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)
Reg Div P.O	ling Address distration S dision of Co display Box 632' dahassee, F	ection orporations 7	Street Address: Registration Se Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R10 SOCCER SCHOOL 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 MARCH 16, 2015 and assigned Florida document number _L15000047212 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: R10 EVENTS LLC 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

lew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany 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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Effectiv	e date, if other than the date of filing:
f an effec	tive 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
	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
e 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
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Filing Fee: \$25.00