## 116000044980

(Re	equestor's Name)				
(Ad	ldress)				
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PICK-UP	WAIT	MAIL			
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2016 APR 21 AM ID: 51
SECRETIARY OF STATE

K.SALY EXAMINER APR 22

## **COVER LETTER**

Div	ision of Cor	porations		
SUBJECT:	CARISPOR	TS LLC		
SOUGETT		Name of Lim	ited Liability Company	
<b></b>			in to gr	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		GUY FRANCOIS		
			Name of Person	
		CARISPORTS LLC		
			Firm/Company	
		14341 SW 134TH AVENU	JE	
			Address	
		MIAMI FL 33186		
			City/State and Zip Code	
		carisportsusa@gmail.com		
		E-mail address: (	to be used for future annual report noti	fication)
For further ir	nformation co	oncerning this matter, please ca	all:	
GUY FRAN	COIS		786 4447283	
	Name of	Person	Area Code Daytim	e 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)

MAILING ADDRESS:

TO:

**Registration Section** 

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

FILED
TOTO APP 2
SECRETARY OF STATE ALLAHASSEE, ELORIOA  and assigned

CARISPORTS LLC

(Name of the Limi	ted Liability Comp (A Florida Limited	pany as it now appears of Liability Company)	n our records.)	TALLAHASSEE, FLORIDA and assigned
The Articles of Organization for this Limited L Florida document number L16000044980	iability Compan	y were filed on $03/03$ .	/2016	and assigned and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited lia	bility company here	:	
The new name must be distinguishable and contain the v	vords "Limited Liab	bility Company," the design	gnation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applic	:able:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	BOX)			
B. If amending the registered agent and registered agent and/or the new registered of			ur records, <u>e</u>	nter the name of the new
Name of New Registered Agent:	GUY FRANC	COIS		
New Registered Office Address:	14341 SW 13	4TH AVENUE		
		Enter Florida	street address	
	MIAMI		, Florid	la 33186
		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 Yew 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>	<u>Address</u>	Type of Action
MGR	GUY FRANCOIS	14341 SW 134TH AVENUE	■ Add
		MIAMI FL 33186	Remove
			☐ Change
MGR	VANESSA JANVIER	14343 SW 134TH AVENUE	
		MIAMI FL 33186	■ Remove
			Change
		-	
			Remove
		<del></del>	□ Change
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Effective date, if other than t	the date of filing: 04/20/2	016		(optional)	
If an effective date is listed, the date n Note: If the date inserted in this	must be specific and cannot be p	plicable statutory:	or more than 90 day	s after filing.) Pur	
document s effective date on the					
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Page 3 of 3

Filing Fee: \$25.00