116000047347

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
,		

Office Use Only



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COVER LETTER

Divi	sion of Cor	porations		•	
	SALVATIO	ON ATHLETICS, LLC.			
SUBJECT:		at () Name of Person Area Code Daytime Telephone Number k for the following amount: Fee \$\square\$ \$30.00 Filing Fee & \$\square\$ \$60.00 Filing Fee,			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		MITCHELL STOVRING			
			Name of Person		
		Southwest Professional Se	rvices of So. FL, Inc.		
		<u></u>	Firm/Company		
		13571 McGregor Blvd #22	2		
			Address		
		Fort Myers FL 33919			
		, 	· · ·		
				Tootion)	
			•	reation)	
For further in	formation c	oncerning this matter, please co	all:		
Mitchell Stov	vring				
	Name o	f Person		Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Certificate of Certified Co (additional con	f Status &

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

SALVATION ATHLETICS, LLC.		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con	mpany were filed on 3/7/2016	and assigned
Florida document number L16000047347		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registeredistered agent and/or the new registered office address		ALLAHANSE Of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
•		
	, Florid	daZip 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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Timothy Lester	1915 NE 13th Ave	
	****	Cape Coral FL 33909	Remove
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fective date, if other than the date of filing:(op	otional)		
n effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days af stee: If the date inserted in this block does not meet the applicable statutory filing requirements, the	fter filing.) Eur sua	nt 605.	.0207 ed as
cument's effective date on the Department of State's records.	inis date will not	t be liste	Ju 43
record specifies a delayed effective date, but not an effective time, at 12:01	1 a.m. on the	earlie	er of
The 90th day after the record is filed.			
ted 2017	•		
()			
Lauren n. Brooks			
Signature of a member or authorized representative of a member			
Lauren Brooks, Ambr			

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Filing Fee: \$25.00