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(Re	questor's Name)	
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## **COVER LETTER**

TO: Registration Section Division of Corporation		•	
subject: Tampa	Bay Wiestli Name of Limi	AS CLUB LLC	
The enclosed Articles of Ame	endment and fee(s) are sub	nitted for filing.	
Please return all corresponder	nce concerning this matter	to the following:	
-	Bryan	Kenney Name of Person	
-		Firm/Company	
-	13333 %	Almera Vista Drive	? 
		City/State and Zip Code  ay wrestling club October used for future annual report notific	
_	tampa be	ay wrestling club of	mail.com
For further information conce			,
Bryan Kenn Name of Per	e J son	at (913) 773- (Area Code) Daytime	Telephone Number
Enclosed is a check for the fo	llowing amount:		
\$25.00 Filing Fee D	330.00 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:

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

Tampa Bay	Wiestling Club LLC	
(Name of the Limited (A	Liability Company as it now appears on our r Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liab Florida document number 700 283/211		and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO		16 SEP 22
B. If amending the registered agent and/or registered agent and/or the new registered office	•	cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street o	nddress
		_, Florida
	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 =	Manager	
AMBR =	'Authorized	Member

<u>Title</u>	<b>Name</b>	Address	Type of Action
MGR	Jeremy Corter	225 Edgewood apt 110	<b>X</b> Add
		225 Edgewood apt 110 Lakeland FL 33803	Remove
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an effective date is lote: If the date i	Other than the date listed, the date must be sp inserted in this block do ive date on the Department	ecific and c oes not me	annot be price the appli	cable statute			ling.) Pursu		
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	15	,	2016	·					
vated Sept									
Dated Sept	15 Began Bryan K	ture of a my	ember or aut	horized repres	sentative of a me	mber		<del></del>	

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Filing Fee: \$25.00