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## **COVER LETTER**

SUBJECT: KickStart Soccer For Kids LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Trevor Trudelle Name of Person
Kick Start Soccer for Kids LLC Firm/Company
10356 Crystal Point drive
Orlando, FL. 32825 City/State and Zip Code
Kick Start Socces For Kids @ Gmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Trevor Trudelle at (407) 917-4888  Name of Person Area Code Daytime Telephone Number
. Prante of 1 erson Area Code Dayunta Telephone Prantoci
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee

MAILING ADDRESS:

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TO:

Registration Section
Division of Corporations

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

KickStort Soccer	For Kids LLC	r records.)
(AF	lability Company as it now appears on our lorida Limited Liability Company)	Tecorus,
The Articles of Organization for this Limited Liabili		16-2016 and assigned
Florida document number <u>L</u>   600011956	.3	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicables	<b>:</b>	
(Principal office address MUST BE A STREET AI		
Enter new mailing address, if applicable:	<u> </u>	j
(Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or re	ogistopad office address on our r	
registered agent and/or the new registered office a	egistered omde address on our r address he <u>re</u> :	ecorus, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
		, 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 As

Page 1 of 3

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 = Ms $AMBR = At$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Laura Lewis	10356 Crystal Point drive	Add
		10356 Crystal Point drive Orlando, FL. 32825	☐ Remove
			☐ Change
			□ Remove
			Change
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			Remove
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. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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17.66. a.	Continuelly	
Note:	tive date, if other than the date of filing:	i05.0207 (3) isted as the
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear	dier of:
Dated	February 24th, 2017.	
	Trevor Trudello	
	Signature of a member or authorized representative of a member  Trevor Trubelle	
	Typed or printed name of signee	
	Page 3 of 3	***
	Filing Fee: \$25.00	