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COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|---|
| SUBJECT: Stawch Sports Management 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: | |
| Stephanis Edwards | |
| Name of Person | |
| | |
| Firm/Company | |
| 4.0. Box 62 | |
| JENSEN BEACH, FL 34958 | |
| City/State and Zip Code Step E O 2 @ Ao 1200 E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | ~ 22 |
| Status Edward at (314) 220-7833 Area Code Daytime Telephone Number 32 | 2017 FEB -1 F |
| Enclosed is a check for the following amount: | U G G G G G G G G G G G G G G G G G G G |
| ■ \$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certi | t, w atu s & |

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

d 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 and assigned Florida document number This amendment is submitted to amend the following: 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 "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 Florida

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.

Citv

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 = M $AMBR = A$ | anager uthorized Member | | |
|--------------------|----------------------------|-----------------------|----------------|
| <u>Title</u> | Name | Address | Type of Action |
| WOK | Danis Jefforson | P.O.150x 62 | |
| | | JENSON BEACH, FL 3495 | Remove |
| | | | Change |
| MGR | Stephanis Edwards | P.O. Box 62 |) Add |
| JUNER ' | | Jensey Beach, FL 3496 | Remove |
| | | | Change |
| | | | Add |
| | | | □ Remove |
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| | | | ☐ Change |
| | | | |
| | | LORIDA | Remove |
| | | · | Change |
| | | | Add |
| | | | Remove |
| | | | Change |

| If amending any other informa | ation, enter change(s) here | : (Attach additional shee | ets, if necessary.) | |
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| Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this bl document's effective date on the D | st be specific and cannot be prior lock does not meet the applica | to date of filing or more than 90 able statutory filing required | (optional) 0 days after filing.) Pursuant to 60 | 5.0207 (3) ted as the |
| the record specifies a delayed The 90th day after the rec | d effective date, but not cord is filed. | an effective time, at | 12:01 a.m. on the earl | ier of: |
| Dated 1/9/2017 | | / . | | |
| , | Signature of a member or autho | nized representative of a mem | ber | |
| | Step Mus (Typed or printe | durens | | |

Page 3 of 3

Filing Fee: \$25.00