

L16000170730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

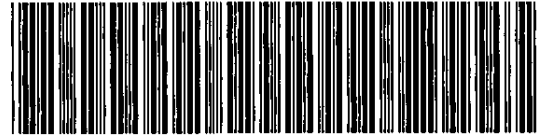
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300293484293

12/23/16--01010--024 **30.00

FILED
2016 DEC 23 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
DEC 27 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Xtreme Revolution Martial Arts, 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:

Xavier Rodriguez
Name of Person

Xtreme Revolution Martial Arts, LLC
Firm/Company

4632 Roundview Ct
Address

Land O' Lakes, FL, 34639
City/State and Zip Code

Xtremerevolutionma@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Xavier Rodriguez at (321) 297 2308
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
2016 DEC 23 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Xtreme Revolution Martial Arts, LLC
(Name of the Limited 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 9/13/16 and assigned
Florida document number L16006170730.

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)

7906 Land O' Lakes Blvd
Land O' Lakes, FL
34638

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7906 Land O' Lakes Blvd
Land O' Lakes, FL
34638

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

City

Florida

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	Xavier Rodriguez	4632 Roundview Ct	<input type="checkbox"/> Add
		Land O' Lakes, FL	<input type="checkbox"/> Remove
		34639	<input checked="" type="checkbox"/> Change
Member	Christine Barrero	4632 Roundview Ct	<input type="checkbox"/> Add
		Land O' Lakes, FL	<input type="checkbox"/> Remove
		34639	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
 2006 DEC 23 PM 1:56
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2016 DEC 23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2016 DEC 23 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated December 19th, 2016

Signature of a member or authorized representative of a member

Xavier Rodriguez
Typed or printed name of signer