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## **COVER LETTER**

|            | Registration Sec<br>Division of Corp |  |   |   |
|------------|--------------------------------------|--|---|---|
| ann ira    |                                      | RIOS INVESTMENTS LLC                         |   |   |
| SUBJEC     | -1:                                  | Name of Lim                                  | ited Liability Company  |   |
| The encle  | osed Articles of /                   | Amendment and fee(s) are sub                 | mitted for filing.  |   |
| Please ret | turn all correspor                   | ndence concerning this matter                | to the following:   |   |
|            |                                      | JOAO C SARTORI FILH                          | 10  |   |
|            |                                      |  | Name of Person  |   |
|            |                                      |  | Firm/Company  |   |
|            |                                      | 3041 BOATING BLVD                            |   |   |
|            |                                      |  | Address   | <del></del>   |
|            |                                      | KISSIMMEE, FL 34746                          |   |   |
|            |                                      |  | City/State and Zip Code   | <del>-</del>  |
|            |                                      | johnny@fairplayarena.co                      |   |   |
|            |                                      | E-mail address: (                            | to be used for future annual report notific                               | cation)   |
| For furthe | er information co                    | ncerning this matter, please ca              | all:  |   |
| JOAO C     | SARTORI FILI                         | но   | 305 647-9303  |   |
|            | Name of                              | Person                                       | Area Code Daytime   | Telephone Number  |
| Enclosed   | is a check for the                   | e following amount:                          |   |   |
| \$25.0     | 00 Filing Fee                        | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | ☐ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

## SARTORI RIOS INVESTMENTS LLC

| (Name of the | Limited | Liability | Compan    | y as it no | ow appears | on our | records. |
|--------------|---------|-----------|-----------|------------|------------|--------|----------|
|              | iΛ      | Liberida  | Limitar I | ability C. |            |        |          |

The Articles of Organization for this Limited Liability Company were filed on 12/08/2016 and assigned Florida document number L16000222869 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 "LLLC," 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 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         | JOAO C SARTORI FILHO | 3041 BOATING BLVD   | Add            |
|              |                      | KISSIMMEE, FL 34746 | ■ Remove       |
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| Effective date, if other than the date of filing:    Object   The 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 Nate:   If the date inserted in this block does not neet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.    Description   Des |  |  |   |             |                               |                |              |                    |                             | -  |
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| ffective date, if other than the date of filing:  O6/26/2018  (optional)  Im 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  Foote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records.  The 90th day after the record is filed.  JUNE 26  2018   |  |  |   |             |                               |                |              |                    |                             | -104<br>-104<br>-104<br>-104<br>-104<br>-104<br>-104<br>-104 |
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| Dated  |  |  |   | e, but n    | ot an eff                     | ective tin     | ne, at 12:0  | 1 a.m. on t        | the earli                   | ier of:  |
| Signature of a member or authorized representative of a member   | Dated  | JUNE 26  | ·                                       | 2018        | )                             |                |              |                    |                             |  |
|  |  | •  | $ \mathcal{A}$                          | <u> </u>    |                               |                |              |                    |                             |  |

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Filing Fee: \$25.00