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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
	☐ WAIT	
(Bu	ısiness Entity Naı	me)
(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
AND ASSET FLORING

IN LARENE

	<i>*</i> *	COVER LET	TER	e,
TO: Registration Section Division of Corpor				
SUBJECT: L	eR Sports L	LC.		
	Name of Limit	ed Liability Compan	у	
The enclosed Articles of Am	endment and fee(s) are subn	nitted for filing.		
Please return all corresponde	ence concerning this matter t	o the following:		
	Alexandra	Hall		
		Name of Perso	n	
	Lie sports	LLC		
		Firm/Company	, _	· · · · · · · · · · · · · · · · · · ·
	1313 Glene	ragles Lane	3	
		Address	" ":	
	Davenport,	Fiorida	33894	
-	alli. halle. E-mail address: (to	y mail.com be used for future as	nnual report notification	on)
For further information cone			·	
Alli Hall Name of Pe		at (_407	988-799 Daytime Tele	52
Name of Pe	rson	Area Code	Daytime Tele	ephone Number
Enclosed is a check for the fi	ollowing amount:		•	
½ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Certified Cop (additional copy	py	□ \$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

L i R S	PORTS LLC		
(Name of the Limit	ted Liability Company as it now (A Florida Limited Liability Cor	appears on our records.) npany)	
The Articles of Organization for this Limited L		on 1/18/17	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability comp	any here:	
The new name must be distinguishable and contain the v	words "Limited Liability Compan	y," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
(<u>Principal office address MUST BE A STREE</u>	TADDRESS)		A SEE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			ANASSEE FLORIDA
B. If amending the registered agent and/ registered agent and/or the new registered of		ess on our records, <u>ent</u>	er the name of the nev
Name of New Registered Agent:	Alexandra	Hall	
New Registered Office Address:	1313 Glene	agles Lane nter Florida street address	
	Davenport	, Florida	33896
	Ciţy		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.

Alexandrattel

11 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
MGR.	Alli Hall	1313 Gieneagies Lane	
		Davenport, Fl. 33896	⊠ Remove
		and the second s	☐ Change
MGR	Alexandra Hall	1313 Alcheagles Lane	 X \^dd
		Davenport, A. 23896	□ Remove
		.	Change
MGR	Greg Hall	1313 Glencagles Lane	□ ∧dd
		Daven port, F1. 33896	Remove
			□ Change
MGR	Gregory Hall	1313 giencagies Lane	∑ Add
		Davenport, Fl. 33896	Remove
			☐ Change
			Ranve
		\$40 · · · · · · · · · · · · · · · · · · ·	AHAN JUN Change

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ited _	June 6	2017		
	-> Aleba Signature	In Hall	ntative of a member	2017 JUN SECRETA
	Alexa	ndra Hall		SSEA YEAR YEAR
	.,	Typed or printed name of sig	nee	7 3 E
		Page 3 of 3		F CRIDE

Filing Fee: \$25.00