6/16/2017

Division of Corporations



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Division of Corporations

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mail.	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EVOLVE SPORTS COMPANY, LLC

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## **COVER LETTER**

то:	Registration Division of C	Section forporations			
or (Dans	EVOLV	E SPORTS COMPANY, LLC	;		
SUBJEC	:I:	Name of Lim	ited Liability Company		
The enclo	osed Articles	of Amendment and fee(s) are sub	mitted for filing,		
Please ret	turn all corres	pondence concerning this matter	to the following:		
		Cheyenne Moseley			
		<del>_</del> ,	Name of Person		
		Legalzoom.com, Inc.			
			Firm/Company		
		101 N. Brand Blvd., 11t	h Floor		
			Address		
		Glendale, CA 91203			
			City/State and Zip Code		
		evolvesportsco@gmail.co	on be used for future annual re	port notification)	
For furthe	er information	n concerning this matter, please ca		port notification;	
Cheyeni	ne Moseley			-0888 ext. 9724	
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Enclosed	is a check for	the following amount:			
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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

(Name of the Limited Liability Comp.  (A Florida Limited	any as it now appears on our records Liability Company)	<u>_</u> )
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000055988</u>	were filed on 03/10/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Limited Lia	hilling Community the during them 11.1	" or the observation I C "
·	395 Medallion Place	> or the anniewation of the control
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	Chuluota, FL 32766	SSE O
Enter new mailing address, if applicable:	395 Medallion Place	FLORI
(Mailing address MAY BE A POST OFFICE BOX)	Chuluota, FL 32766	- ≥
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		, enter the name of the ne
New Registered Office Address:	Enter Florida street address	
	. Flo	rida
-	City	Zip Cocle
New Registered Agent's Signature, if changing Registered Agent	1	
I hereby accept the appointment as registered agent and agi	ree to act in this capacity. I fur	ther agree to comply with th

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

To: Page 5 of 6

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Nicholas Laber	395 Medallion Place	□ Add
		Chuluota, FL 32765	<b>⊠</b> Remove
			Add
		<u></u>	□ Remove
		<u>M</u>	Add
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David Howard, Devi	in Routic, Samuel Bates, and Joshua Brooks, to	
read as follows:		
395 Medallion Place	Chuluota, FL 32766	
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the date this document is filed by	commot be prior to date of receipt or filed date and cannot be more the Florida Department of State)	than 90 days after

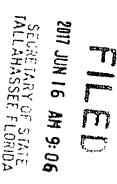
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David Howard, Devir	Routic, Samuel Bates, and Joshua Bro	oks, to
read as follows:		
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