LI700013	37323
(Requestor's Name) (Address)	200331382132
(Address) (City/State/Zip/Phone #)	200331362132
Business Entity Name)	
(Document Number)	07/02/1901007023 **60.00
Certified Copies Certificates of Status	RECEIVED JUL 01 2013
Special Instructions to Filing Officer:	2019 J 1 Alt II: 3 1
5.3.19 Office Use Only	Amend/Mame Chg
	JUL 1 3 2019

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۰۰ <sup>ر</sup> م		COVER LETTER	فرر
TO: Registration S Division of Co			
ATTCG N	fartial Arts LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub		
Please return all correspo	ondence concerning this matter	to the following:	
	Robert Weber		
	<u>.</u> .	Name of Person	
	Hayman-Woodward		
		Firm/Company	
	801 Brickell Avenue, 15th	Floor	
		Address	
	Miami, FL 33131		
		City/State and Zip Code	
	robert.weber@hymanwood E-mail.address: 0	ward.com to be used for future annual report notif	lication)
For further information of	concerning this matter, please ca		
Robert Weber		305 877-8941	
Name o	of Person	at ()	- Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy (s enclosed)
	ING ADDRESS:	STREET/COURI	
Divisi	ration Section on of Corporations	Registration Sectio Division of Corpor	
	lox 6327 assee, FL 32314	Clifton Building 2661 Executive Ce. Talłahassee, FL 32.	

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ny as it now appears on our records.)
Jability Company)
were filed on and assigned
ility company here:
ity Company," the designation "LLC" or the abbreviation "L.L.C"
2750 Coral Way #204
2750 Coral Way #204 Miami, FL 33145

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flurida street	address
		, Florida
	Сцу	Zıp 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. Thereby 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, <u>enter the title, name, and address of each person being added</u> or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	<b>Type of Action</b>
MGR	Henrique Gama Filho	2750 Corał Way #204 Miami, FL 33145	bbA 🖻
			Remove
			Change
AMBR	BJJ Holding Group LLC	BJJ Holding Group LLC 801 Brickell Avenue 15th Floor MiAmi, FL 33131	Add
			🗆 Remove
			🖬 Change
<u> </u>			O Add
			Remove
			Change
			🗋 AdJ
		/	Remove
			Change
			Add
			Remove
			Change
			🗖 Add
			Remove
			Change

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• • • D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

	<u> </u>
/	
<i>*</i>	
	-

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

June 26 ned	<sup>2019</sup> 7
<u> </u>	
	* T
	Signature of a member or authorized representative of a member
Robert H. Weber	11
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00