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J. HARRIE

## **COVER LETTER**

TO: Registration Section Division of Corporations	• •
H&H CHEBLI CONSUL SUBJECT:	TING LLC
SUBSECT.	Name of Limited Liability Company
The enclosed Articles of Amendment a	nd fee(s) are submitted for filing.
Please return all correspondence concer	rning this matter to the following:
НАЧТИЕ	M CHEBLI
<del>  </del>	Name of Person
H & HC S	PORTS LINE LLC
	Firm/Company
13525 SH	VER STRAND FALLS DRIVE
	Address
ORLAND	OO. FL 32824
<del></del>	City/State and Zip Code
HAYTHEN	V.CHI@GMAIL.COM
For further information concerning this	E-mail address: (to be used for future annual report notification)  matter, please call:
HAYTHEM CHEBLI	407 797-7105 at ()
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following ar	mpunt:
	riling Fee & S55.00 Filing Fee & S60.00 Filing Fee, cate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRES  Registration Section Division of Corporati P.O. Box 6327 Tallabasea, El. 3234	Registration Section  Division of Corporations  Clifton Building
Tallahassee, FL 3231	4   2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  H & HC SPORTS LINE LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".  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	H&H CHEBLI CONSULTI			
Florida document number  L170001 00786  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  H & HC SPORTS LINE LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".  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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address	(Name of th	ne Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
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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 \_D Add \_□ Remove ☐ Change □ Add \_□ Remove \_ Change □ Remove ☐ Change □ Add \_□ Remove ☐ Change □ Add □ Remove: □ Change -

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Filing Fee: \$25.00