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COVER LETTER

TO:					
CUDIE				0	7
SUBJE	C1:	· Name of Limited			
The enc	losed Articles of A	mendment and fee(s) are submit	tted for filing.		
Please r	eturn all correspond	dence concerning this matter to	the following:		
		Sergio Santos Da Costa			
The enclosed Articles of Amendment and fee(s) are submitted for filting. Please return all correspondence concerning this matter to the following: Sergio Santos Da Costa Name of Person Gracie Barra Boca Raton Firm/Company 1906 Clint Moore Rd. Ste 4 Address Boca Raton, Florida 33496 City/State and Zip Code gb@gbbocaraton.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sergio Santos Da Costa Name of Person 4 (1) Area Code Daytime Telephone Number Enclosed is a check for the following amount: Securificate of Status Certificate of Status & Certificate Copy (additional copy is enclosed)					
		Gracie Barra Boca Raton			
			Firm/Company		
		PRINGS BRAZILIAN JIU JITSU LLC Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Sergio Santos Da Costa Name of Person Gracie Barra Boca Raton Firm/Company 1906 Clint Moore Rd. Ste 4 Address Boca Raton, Florida 33496 City/State and Zip Code gb@gbbocaraton.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: of Person at (
	Division of Corporations CORAL SPRINGS BRAZILIAN JIU JITSU LLC Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. ase return all correspondence concerning this matter to the following: Sergio Santos Da Costa Name of Person Gracie Barra Boca Raton Firm/Company 1906 Clint Moore Rd. Ste 4 Address Boca Raton, Florida 33496 City/State and Zip Code gb@gbbocaraton.com E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: rgio Santos Da Costa Name of Person Area Code Daytime Telephone Number 1 \$25.00 Filling Fee Certificate of Status Certificate Copy (additional copy is enclosed) City/State and Zip Code gb@gbbocaraton.com E-mail address: (to be used for future annual report notification) Further information concerning this matter, please call: 1 \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status & Certificate Copy (additional copy is enclosed)				
			City/State and Zip Code		
Boca Raton, Florida 33496 City/State and Zip Code gb@gbbocaraton.com					
For furt	her information cor			eport nonneadon)	
		icerting this matter, piease carr.			
Sergio S					
	Name of I	Person	Area Code	Daytime Telepho	one Number
Enclose	d is a check for the	following amount:			
■ \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy		Certificate of Status & Certified Copy
	Mailing Address: Registration Se			dress: tion Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORAL SPRINGS BRAZILIAN JIU JITSU LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{11/16/2017}{1}$ and assigned Florida document number _____L17000237087 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 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 new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida _

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 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	Fabiano Carvalho	8872 NW 56th St	□Add
		Coral Springs, FL 33067	Remove
			Remove 220 OChange
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record specifies a delayed is filed. October 7	l effective date, but no	ot an effective tim 2020	e, at 12:01 a.m. on	the earlier of: (b)	The Four day ar	
record specifies a delayed is filed. October 7		2020	_•		The Four day ar	
record specifies a delayed is filed.		2020	e, at 12:01 a.m. on		The Four day ar	

Filing Fee: \$25.00