## L18000021516

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## **COVER LETTER**

TO: Registration Se Division of Co			
Books and	Basketball LLC		
SUBJECT:			
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	NaDorian Hudson		
		Name of Person	
	Books and Basketball 4.1.	C	
	<del></del>	Firm/Company	<del>.</del>
	4039 Navigator Way		
	<del></del>	Address	<del></del>
	Kissimmee Florida 34746	5	
	info@booksandbball.com	City/State and Zip Code	3011
	E-mail address: (	to be used for future annual report not	ification)
For further information of	oncerning this matter, please c	all·	
NaDorian Hudson		404 247-1229	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)
Mailing Addres Registration 9		Street Address: Registration Se	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	•
Tallahassec. l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Books and Basketball LLC		
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our rec i Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability C  L18000021516	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "I	
Enter new principal offices address, if applicable:		2021 SEC
Principal office address MUST BE A STREET ADDR	RESS)	
	~	2 P
Enter new mailing address, if applicable:		<u>ිරි</u> ග
(Mailing address MAY BE A POST OFFICE BOX)		်းကို သိ
	~	
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>en</u>	ter the name of the new regi
Name of New Registered Agent:		
New Registered Office Address:	,, ,,	
	Enter Florida street add	tress
		Florida
	City	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.

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
MGR	NaDorian Hudson	1431 Simpson Rd. Suite 14 Kissimmee FL 34744	
			□Remove
			Change
MGR	Rashay Hudson	1431 Simpson Rd. Suite 14 Kissimmee FL 34744	□ Add
		<del></del>	□Remove
		CRE VARA	☐ Change
			AddÎ ည ည ထြRemove
			□Change
			🗆 Add
			🗆 Remove
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			□Change

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Signature of a member or authorized representative of a member		02	July 18
Signature of a member or authorized representative of a member			MA
Typed or printed name of signee	ober	er or authorized representative of a member	Signature of