## L180000108871

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## **COVER LETTER**

OUD IN OFF	PRO ATHLETES INVESTM	ENTS MANAGEMENT GROUP LI	C		
SUBJEC1:	Name of	Limited Liability Company	•		
The enclosed Arti	icles of Amendment and fee(s) are	submitted for filing.			
Please return all c	orrespondence concerning this mat	ter to the following:			
		Jose Gregorio Salas			
		Name of Person	ENTS MANAGEMENT GROUP LLC rm/Company L BAY LN APT 202		
	PRO ATHLETES	INVESTMENTS MANAGEMENT	GROUP LLC		
		Firm/Company			
	81	7 COASTAL BAY LN APT 202			
		Address			
	К	ISSIMMEE, FLORIDA 34741			
		City/State and Zip Code			
		alasgroupve@hotmail.com ss: (to be used for future annual report no	tification)		
For further inform	nation concerning this matter, pleas				
	GREGORIO SALAS	407 393 - 842	25		
	Name of Person	at () Area Code Dayti	me Telephone Number		
Enclosed is a chec	ck for the 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 tadditional copy is enclosed		
Mailing	Address:	Street Address:			

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	TES INVESTMENTS MANAGEMENT C		<u>. ගිටි</u> රා 📆
(Name of the	Limited Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.)	He P I
The Articles of Organization for this Limit	ted Liability Company were filed on	05/01/2018	FLC Tikksigned
Florida document numberL180001088	· · · · · · · · · · · · · · · · · · ·		•
This amendment is submitted to amend the	e following:		
A. If amending name, enter the new na	me of the limited liability company ho	ere:	
The new name must be distinguishable and contain	the words "Limited Liability Company," the c	designation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if a	pplicable:		
(Principal office address MUST BE A ST	REET ADDRESS)		
Enter new mailing address, if applicable	<u> </u>		
(Mailing address MAY BE A POST OFF	<u></u>		
B. If amending the registered agent and agent and/or the new registered office a		records, <u>enter the name</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo.	rida street address	
		, 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 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>	<u>Address</u>	Type of Action
MGR	ROSA M URBANEJA		□Add
		817 COASTAL BAY LN APT 202 KISSIMMEE FL	_3 <u></u> ■Remove
			□Change
			🗆 Add
			□Remove
			□ Change
			□Add
			□Remove
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<u>.</u>			□ Add
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			☐ Change

ii ameno	ding any other ini	formation, enter o	change(s) here: /Atta	ich additional sheets, if n	ecessary.)	
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If an effecti <u>Note:</u> If (	e date, if other that ive date is listed, the da the date inserted in the this effective date on	ate must be specific and this block does not t	d cannot be prior to date of meet the applicable state	(op filling or more than 90 days aff utory filling requirements, ti	<b>tional)</b> ter filing.) Pursuant to 6 his date will not be l	505.0207 isted as t
e record sprd is filed.	pecifies a delayed ef	ffective date, but no	t an effective time, at 12	2:01 a.m. on the earlier of:	(b) The 90th day a	fter the
Dated	JUNE 02nd			,	IALL!	2022 .
		Jour o	m in 5-1	\	77 : 144 96 :: 66 ::	8- HNF
		Signature of a	member or authorized repr	resentative of a member	—————————————————————————————————————	
			JOSE GREGORIO S	SALAS	11 CO	
	<del></del>		Typed or printed name of	of signer	<u> </u>	ؽ