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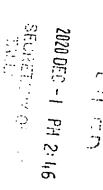
| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

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Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

| SUBJECT: <u>LEVIV</u> | al Athletic A | <u>Cademy</u> LLC ited Liability Company | |
|---|--|---|---|
| | Amendment and fee(s) are sub ondence concerning this matter | | |
| | <u> Taylor</u> | S M 1 + M Name of Person | |
| | REVIVAL | Athletic Acade | ?my |
| | 12821 SW | 13 4 CT Address | |
| | | City/State and Zip Code | |
| For further information c | +aylor@rev E-mail address: (| IVAI ath let ca ca to be used for future annual report noti all: | idemy. (0m fication) |
| | f Person | | e 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 (additional copy is enclosed) |
| Mailing Address Registration S Division of C P.O. Box 632 | Section Forporations | Street Address: Registration Sec Division of Cor The Centre of T | porations |

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REVIVAL ATHLETIC ACADEMY LLC

| (Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company) | rs on our records.) | |
|--|---------------------------------|-------------------|
| The Articles of Organization for this Limited Liability Company were filed on! Florida document number8000116511 | 5/9/18 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liability company h | <u>ere</u> : | |
| Pevival Training Lab LLC The new name must be distinguishable and contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the organization of the contain the words "Limited Liability Company," the contain the contain the words "Limited Liability Company," the contain the co | lesignation "LLC" or the abbrev | viation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | <u> </u> | 2020 |
| <u> </u> | 至美 | 0 0 0 |
| | · · · · · | - 0 |
| Enter new mailing address, if applicable: | ! % | <u>·</u> |
| Mailing address MAY BE A POST OFFICE BOX) | . F. | PH - |
| | - | - 13 |
| | | <u>£</u> |
| B. If amending the registered agent and/or registered office address on our ragent and/or the new registered office address here: Name of New Registered Agent: | ecords, <u>enter the name o</u> | f the new registe |
| New Registered Office Address: | | |
| | rida street address | · · |

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.

City

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 | Ivan Hidalgo | 12993 SW 134 Terrace | IEXUU |
| | | Miami, FL 33186 | □Remove |
| | | | □Change |
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| f an effective date Note: If the date | if other than the date is listed, the date must be sp e inserted in this block do ctive date on the Departn | secific and cannot be pri- oes not meet the appl | or to date of filing or mor licable statutory filing | (optional e than 90 days after filin requirements, this dat | g.) Pursuant to 605,0207 (3 |
| e record specific rd is filed. | s a delayed effective date | , but not an effective | time, at 12:01 a.m. or | the earlier of: (b) 1 | he 90th day after the |
| Dated _1] 2 | 7/20 | , | <u> </u> | | |
| | Jaylo | 25 Smit | thorized representative o | | |
| | (Izifina | ture of a member or au | thorized representative o | f a member | |