

L18000197135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

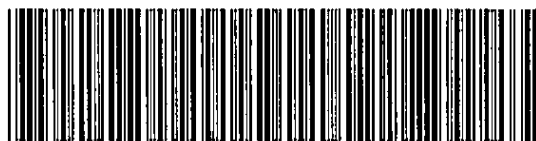
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100319204641

10/08/18--01005--021 **25.00

FILED
2018 OCT -8 PM 1:22
NEW YORK STATE
JULIA ROBERTSON

D BRUCE
OCT 20 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROWDIES SOCCER, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN P. HIGGINS

Name of Person

TAMPA BAY RAYS BASEBALL LTD.

Firm/Company

ONE TROPICANA DRIVE

Address

ST. PETERSBURG, FL 33705

City/State and Zip Code

JHIGGINS@RAYSBASEBALL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN P. HIGGINS

727 825-3187
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
2018 OCT -8 PM 1:22
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ROWDIES SOCCER, 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 AUGUST 16, 2018 and assigned
Florida document number L18000197135.

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:

ONE TROPICANA DRIVE, ST. PETERSBURG, FL 33705

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

ONE TROPICANA DRIVE, ST. PETERSBURG, FL 33705

(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:

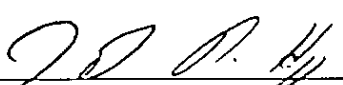
Name of New Registered Agent: JOHN P. HIGGINS

New Registered Office Address: ONE TROPICANA DRIVE
Enter Florida street address

ST. PETERSBURG, Florida 33705
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>	<u>Address</u>	<u>Type of Action</u>
MGR	EUGENO NOWELL	1717 K ST NW, WASHINGTON, DC 20006	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	STUART STERNBERG	ONE TROPICANA DRIVE, ST. PETERSBURG, FL 33705	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2010 OCT 1 PM 1:22
FBI - TAMPA

2018 OCT - 8
SOLIMAN
OCT 06 09

FILED
2018 OCT -8 PM 1:22
CLERK OF DISTRICT COURT
JULIA A. HARRIS

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated OCTOBER 5, 2018

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

JOHN P HIGGINS

Typed or printed name of signee