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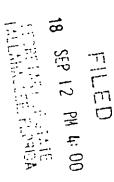
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COVER LETTER

TO:	Registration Se Division of Cor					
SUBJE		silient Athletics				
SUBJE	Name of Limited Liability Company					
The enc	closed Anicles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspo	ondence concerning this matter	to the following:			
		Gordon Samartino				
			Name of Person			
		396 Chesham Street	Firm/Company			
		590 Chesham Sueet				
Address Ormond Beach, FL 32174						
		City/State and Zip Code gordon.samartino@comcast.net				
	ication)					
For furt	her information c	oncerning this matter, please c	all:			
Gordon	Samartino		609 209-9353 at ()			
	Name o	f Person		Telephone Number		
Enclose	ed is a check for the	he following amount:				
\$25	i,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)		
	MAIL	ING ADDRESS:	STREET/COURIE	ER ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

We Are Resilient Athletics LLC	
(Name of the Limited Liability Company as i (A Florida Limited Liabilit	t now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were	
Florida document number L18000209433	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability c	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Co-	mpany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	SA T
	12 LEI
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records, enter the name of th
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	Tity 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	Gordon Samartino	396 Chesham Street Ormond Beach, FL 32174	■ Add
			□ Remove
			□ Change
			□ Add
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Tective date, if oth	er than the date	of filing:	<u> </u>	(0]	otional)
an effective date is liste	d, the date must be sp	ecific and cannot be	prior to date of filing o	r more than 90 days a ling requirements,	otional) fler filing.) Pursuant to 605.02 this date will not be listed
ocument's effective of	late on the Departn	nent of State's rec	ords.	,	
record specifies	s a delayed effe	ctive date, but	not an effective	e time, at 12:0	1 a.m. on the earlier
The 90th day af	ter the record is	s filed.			
September 5		2018			
ated	7) . 4		·		
	$U \cap \mathcal{A}$				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00