## 119000020151

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## **COVER LETTER**

TO:	Registration Sec Division of Corp							
		CE SPORTS LLC						
SUBJEC	T:	Name of Limited Liability Company						
The encl	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.					
Please re	tum all correspor	ndence concerning this matter	to the following:					
		Juan Lopez Salaberry						
		INNERFORCE SPORTS I	Name of Person					
		Firm/Company						
		HHE Dilido Dr Address						
		Miami Beach, 33139						
		City/State and Zip Code juan@innerforcesports.com						
		E-mail address: (to be used for future annual report notification)						
For furth	er information co	oncerning this matter, please ca	all:					
Juan Lo <sub>l</sub>	pez Salaberry		786 2963336 at ()					
	Name of	Person	Area Code Daytime	Telephone Number				
Enclosed	d is a check for th	e 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:

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TO:

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

Division of Corporations Clifton Building

Registration Section

2661 Executive Center Circle Tallahassee, FL 32301

STREET/COURIER ADDRESS:

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

INNERFORCE SPORTS LLC

(Name of the Limited Liability Company as it now appears on our records) | JAN 30 A 11: 20
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on January 18	3, 2019 and assigned
Florida document number L19000020151		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	et address
		Florida
	City	, Florida 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>	Type of Action
AMBR	DIMACALTD	AGISILAOU, 2	
		LIMASSOL, LI 3087 CY	Add
		EININGONA (A 5007 CT	■ Remove
			Change
AMBR	DIEGO VARELA	LAGASCA 18, 3D	<b>■</b> Add
		28001, MADRID, SPAIN	
			□ Remove
			☐ Change
	•		Change
			Remove
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(If an et <u>Note:</u>	tive date, if other than the date of filing:  Tective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	January 28 2019
	•

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Typed or printed name of signee

Filing Fee: \$25.00