## 119 0000 72 715

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
8/25/21

Office Use Only



400371312794

21 AUG 16 PM 3: 24

## **COVER LETTER**

Division of Cor					
SUBJECT:	Celta So	ccer Academy LLC			
30b3EC1.	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	N	Nelson Velez			
		Name of Person			
	Celta S	Soccer Academy LLC			
		Firm/Company			
	2906 Via Tuscany way				
		Address			
	Kissimme	e fl 34744	·		
		City/State and Zip Code			
	neovel123@	gmail.com to be used for future annual report no	1 Carling 1		
For further information c	oncerning this matter, please c		(incaron)		
Nelson Velez		at (_407)40	7-223-8342		
Name o	f Person		me 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:		Street Address:			
Registration Section		•	Registration Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Celta Soccer Academy LLC1 AUG 16 PH 3: 24

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 03/14/2019 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_ and assigned Florida document number L19000072715 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 "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 OF FICE 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: New Registered Office Address: Enter Florida 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.

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 = M $AMBR = A$	anager uthorized Member			The second secon	
<u>Title</u>	<u>Name</u>		Address	21 AUG 16 PH 3: 24	Type of Action
					⊠Add
				<del></del>	□Remove
					🗆 Change
MGR	Stelian Baban	1643 	Windsor C	0ak lane Kissimme FI 34	<b>1743</b> □Add
					⊠Remove
					Change
MGR	Shukhrat kasimov	_ 240	8 Berkshire	e Ct Kissimmee fl 34746	🗆 Add
					⊠Remove
					□Change
		<del></del>			□Add
					□Remove
					□Change
	· · · · · · · · · · · · · · · · · · ·				🗀 Add
					□Remove
					□Change
					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			-		□Remove
					□Change

	any other information, enter change(s) here: (Attach additional she	A Commence of the American
	21	AUG 16 Pri 3: 24
<del></del>		
		<u> </u>
	<del></del>	
		···
<del></del>		<del></del>
		· <del></del>
<u> </u>		
fective date,	, if other than the date of filing:	(optional)
	te is listed, the date must be specific and cannot be prior to date of filing or more than 9 ate inserted in this block does not meet the applicable statutory filing require	
cument's effe	ective date on the Department of State's records.	
acord enecities	es a delayed effective date, but not an effective time, at 12:01 a.m. on the ca	rlier of: (b) The 90th day after the
is filed.	es à delayed effective date, but flot all'effective time, at 12.01 a.m. on the ca	The or (b) The som day are the
	August 10 good	
ated		
	August 10 2021 VMC	
<del></del>	Signature of a member or authorized representative of a mem	ber
	Nelson Velez	
	Typed or printed name of signee	