Ponta Department of State
Division of Corporations

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EXPAT CONSULTING CORP.

Account Number : I20190000096 Phone : (407)745-1112

Fax Number : (407)641-8083

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: acc@expatconsulting.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ORLANDO VIP INTERNATIONAL SERVICES LLC

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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TÓ: Registration Se Division of Cor			.
	O VIP INTERNATIONAL SER	VICES LLC	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	NILTON FREGNI		
		Name of Person	
	EXPAT CONSULTING C	ORP	
		Pirm/Company	
	8615 COMMODITY CIRC	CLE II	
		Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	
	acc@expateonsulting.com		_
	E-mail address: (to be used for future annual report notif	lication)
For further information of	concerning this matter, please ca	all:	
NILTON FREGNI		407 7451112 at ()	
Name (n' Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	the 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)
<u>Mailing Addre</u> Registration		Street Address: Registration Sec	
Division of C	Corporations	Division of Cor The Centre of T	
P.O. Box 63 Tallahassee.			e Street, Suite 810

Tallahassee, FL 32303

To: Page 5 of 7

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

ORLANDO VIPINTERNATION.			
(Name of the Limit	ed Liability Company as it is (A Florida Limited Liability (now appears on our records.) Company)	
The Articles of Organization for this Limited L Florida document number 1.19000090290	iability Company were fi	led on <u>04/02/2019</u>	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability co	mpany here:	
SPORTS ENTERTAINMENT LLC			
The new name must be distinguishable and contain the v	vords "Limited Liability Comp	pany," the designation "LLC" (or the abbreviation "L.L.C."
Enter new principal offices address, if applic	:able:		20 <u>.</u>
(Principal office address MUST BE A STREE	<u>TADDRESS)</u>		
			<u> </u>
			圣工
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>ΒΟΧ)</u>		
			4)
B. If amending the registered agent and/or agent and/or the new registered office addressed Name of New Registered Agent:	EXPAT CONSULTIN		it name in the new se_
New Registered Office Address:	8615 COMMODITY O	TIR #11	<u> </u>
		Enter Florida sweet address	
	ORLANDO		rida <u>32819</u>
	Cit	ית	Zip Code
New Registered Agent's Signature, if changing	Registered Agent;		
I hereby accept the appointment as register provisions of all statutes relative to the propactions of my position as regions filed to merely reflect a change in the company has been notified in writing of this	per and complete perfoi gistered agent as provide registered office addre	rmance of my duties, and ed for in Chapter 605, F	i Lam famitiar with and 'S. Or, if this document is
	If Changing R	ton Fragni egistered Agen, 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>	Name	Address	Type of Action
AMBR	VILMO LUIZ DE F MEDEIROS	13136 HEATER MOSS DR #401	
		ORLANDO, FL 32837 US	□Remove
			€Change
AMBR	MARCIO KESKE	13112 HEATER MOSS DR #612	■ ∧dd
		ORLANDO, FL 32837 US	□Remove
			[]Change
MGR	PRISCILA R F MEDEIROS	13136 HEATER MOSS DR #401	DAdd
		ORLANDO, FL 32837 US	Remove 20
			□ Add □ □ Add □
			Remove D
			□ Change
			□Remove
			Change
			□Add
			□ R¢move
			Change

Tective date, if other than the date of filing: In effective date is listed, the date must be specific and caunot be prior to date of filing or more than 90 days after filing ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date occument's effective date on the Department of State's records. The defective date on the Department of State's records. The defective date of filing of more than 90 days after filing of more than 90 days after filing oter. The date of filing of more than 90 days after filing of more than 90 days after filing oter. The date of filing of more than 90 days after filing of more than 90 days after filing oter. The date of filing of more than 90 days after filing of more filing	
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Signature of a member or authorized representative of a member	