L19000174280

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MIR. S. Alla

COVER LETTER

10:	Division of Cor		٠.	
SUBJEC		ni Athletics Apparel, LLC		
SUBJEC		Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	aum all correspo	ndence concerning this matter	to the following:	
		Michelle Fletcher		
		Sports Miami Athletics Ap	Name of Person parel, LLC	
		10360 Sw 186th st #90726	Firm/Company	
		Miami Fla 33197	Address	
		Sportsmiamiapparel@gmail		
		E-mail address: (1	to be used for future annual report notif	ication)
For furth	er information c	oncerning this matter, please co	all:	
Michelle	Fletcher		786 227-1388	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	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: Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clufton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sports whami Athletics Apparel , L						
(<u>Name of the Limi</u>	ted Liability Compa (A Florida Limited)	iny as it now appears on our rec Uiability Company)	ords.)			
The Articles of Organization for this Limited L Florida document number L19000174280	.iability Company	were filed on July 4th 2019	and assigned			
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name of	of the limited liab	ility company here:				
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the designation "I	J.C" or the abbreviation "L.L.C."			
Enter new principal offices address, if applic	cable:	17304 Walker Ave Suite #112 Miami Fla 33157				
(Principal office address MUST BE A STREI	ET ADDRESS)					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and		10360 SW 186th st #90726 Miami Fla 33197 ffice address on our reco	321 MI			
registered agent and/or the new registered o						
Name of New Registered Agent:	Michelle Fletcher					
New Registered Office Address:	17304 Walker	Ave Suite #112				
		Enter Florida street add				
	Mlami		Florida 33157			
		City	Zıp 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AR	Randy Mosley	2043 SW 117th ct	
		Miami Florida 33177	
			■ Remove
AMBR	Latrece Times	12246 Sw 215th Terr	
		Miami Florida 33177	Li Add
			■ Remove
			Change
			□ Remove
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			☐ Add
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			☐ Change
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	A	ugust 19th. 2019			
ective date, if other than the effective date is listed, the date me te: If the date inserted in this b nument's effective date on the I	e date of filing: ist be specific and can lock does not meet	not be prior to date o the applicable stat	filing or more than 90 utory filing requires	(optional) Odays after filing.) Pursua ments, this date will no	unt to 605.0207 at be listed as
record specifies a delaye he 90th day after the rec	d effective date cord is filed.	, but not an ef	fective time, at	12:01 a.m. on the	e earlier of
August 19th	20	019			
11.000	. 71 A.A	ber or authorized rep		· ·	

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Typed or printed name of signee

Filing Fee: \$25.00