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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Office Use Only



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VIDING AF BELY SECRETARY OF STATE OF LAHASSEE, FLORIDA

Y SULKER 1:07 25 2019

COVER LETTER

	gistration Serision of Corp			
CHRICT.	CELEBRIT	Y SOCCER MATCH LLC		
SUBJECT:		Name of Lin	nited Liability Company	
The enclosed	l Articles of z	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		ALEJANDRA AVELLAN	NET	
		CELEBRITY SOCCER M	Name of Person	
		1341 NW 22ND ST STE A	Firm/Company	
		MIAMI, FL 33014	Address	
		DIRECTOR@CELEBRITY	City/State and Zip Code 'SOCCERMATCH.COM	
		E-mail address: (to be used for future annual rep	port notification)
For further in	formation co	ncerning this matter, please ca	all:	
ALEJANDR.	A AVELLAN	NET	305 873-8	763
	Name of	Person	Area Code	Daytime Telephone Number
		7		
Enclosed is a	check for the	following amount:		
□ \$25.00 Fi	ling Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &

MAILING ADDRESS: Registration Section Division of Corporations

.

P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		CELEBRITI SOCCER MATCH ELC		
	pany as it now appears on our records.) d Liability Company)	(Name of the Limited Liability of (A Florida Li		
and assigned	The system of the distribution $\frac{09/25/2019}{}$ and as $\frac{09/25/2019}{}$ and $\frac{1}{2}$	The Articles of Organization for this Limited Liability Conforda document number <a "<="" [.="" c.="" href="https://example.com/limited-liability-com/liability-com/limited-liability-com/limited-liability-com/limited-</th></tr><tr><td></td><td></td><td>This amendment is submitted to amend the following:</td></tr><tr><td></td><td>ability company here:</td><td>A. If amending name, enter the new name of the limite</td></tr><tr><td>provintion " l.="" td=""><td>ikilia Campany" the decimation "I I C" at the abbreviation."</td><td>The new name must be distinguishable and contain the words "Limited</td>	ikilia Campany" the decimation "I I C" at the abbreviation."	The new name must be distinguishable and contain the words "Limited
ACTION LALAN.	1341 NW 22ND ST STE A	<u>-</u>		
	MIAMI, FL 33142	Enter new principal offices address, if applicable: <i>Principal office address MUST BE A STREET ADDRE</i> .		
		rancipal office agaress most ble A STREET ADDRES		
	1341 NW 22ND ST STE A			
2019 SEE		Enter new mailing address, if applicable:		
ARE OF	Par C	Mailing address MAY BE A POST OFFICE BOX)		
SPAN No I	5A N			
Tie name of the		 If amending the registered agent and/or register egistered agent and/or the new registered office address 		
<u>9 </u>		Name of New Registered Agent:		
		New Registered Office Address:		
	Enter Florida street address			
Zip Code	, Florida			
She state	ere: Enter Florida street address Florida	Name of New Registered Agent:		

New Registered Agent's Signature, if changing Registered Agent:

COLODORN COCCO MATCHALC

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
DIR	Edgar Andres Peña	1323 Portofino Circle, Apt 908 Weston, FI 33326	= Add
			Remove
			☐ Change
DIR	Jairo Gonzalez	101 Crandon Blvd 475 Key Biscayne, Fl 33149	_ ■ Add
			Remove
			Change
DIR	Erwin Paul Kuhne	1103 Washington St Hollywood, Fl 33019	■ Add
		 -	□ Remove
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<u>iote:</u> If the	ate, if other that date is listed, the da e date inserted in effective date on	this block does n	iot meet the appl	icable statutory f	r more than 90 days	optional) after filing.) Pursuar , this date will not	nt to 605.0207 be listed as
	specifies a de h day after the			ot an effectiv	e time, at 12:6	01 a.m. on the	earlier of
OCT	OBER 21		2019				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00