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	equestor's Name	<u> </u>
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COVER LETTER

TO:	Registration Se Division of Cor	ction porations	વ ન	45
		ball Club, LLC	-	
SUBJ	ЕСТ:		ted Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please	return all correspo	ndence concerning this matter t	to the following:	
		Amy Schrader		
		·	Name of Person	
		Baker Donelson		
			Firm/Company	
		101 North Monroe St., Suit	e 925	
			Address	
		Tallahassee, FL 32301		
			City/State and Zip Code	<u></u>
		aschrader@bakerdonelson.ce	om	
		E-mail address: (to	o be used for future annual report notifi	cation)
For fu	rther information c	oncerning this matter, please ca	II:	
Lesli	e Terry		850 425-7517 at () Daytime	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclo:	sed is a check for th	ne following amount:		
■ S2	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 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

Cocoa Baseball Club, LLC		
(<u>Name of the Limited I</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	一種の点
The Articles of Organization for this Limited Liabi Florida document number L19000246324		and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, <u>enter the πew name of th</u>	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the	he abbreviation "llC."
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	t.nter r tortua street address	
-	, Florida	7 in 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	James Jaworski	110 East Orange Avenue Daytona Beach, FL 32114	□ Add
			■ Remove
			☐ Change
AMBR	Mike Miller	375 Sylvan Dr. Winter Park, FL 32789	Add
			Remove
			Change
		-	□ Remove
			□ Change
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an effi lote:	ve date, if other than the date of filing: (optional) ective 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 605.020 lf the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
	ord 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.
ated .	October 15 2019
	Signature of a member or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00