L20 CCCC 66559

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	cument Number)	
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COVER LETTER

istration Se ision of Cor				
	Same of Limi	ited Liability Company		
Articles of	Amendment and fee(s) are sub-	mitted for filing.		
all correspo	ndence concerning this matter	to the following:		
	LEXIE RIVERS			
		Name of Person		
	PRIME CORPORATE SE	RVICES		
		Firm/Company		
	12226 S 1000 E STE #3			
		Address		
	DRAPER, UT 84020			
		City/State and Zip Code		
	LLCSUPPORT@PRIMECORPORATESERVICES.COM			
			meation)	
iformation c	oncerning this matter, please ca	ıll:		
ERS		855 577-4639	_	
Name o	f Person	Aren Code Daytin	ne Telephone Number	
check for th	ne following amount:			
iling 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)	
	Champion Champion Champion Champion Champion Champion Champion Check for the Champion Check for the	ChampionClip Enterprises LLC Name of Limi Articles of Amendment and fee(s) are subtall correspondence concerning this matter LEXIE RIVERS PRIME CORPORATE SE 12226 S 1000 E STE #3 DRAPER, UT 84020 LLCSUPPORT@PRIMECO E-mail address: (ifformation concerning this matter, please or ERS) Name of Person check for the following amount: iling Fee	Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: LEXIE RIVERS Name of Person PRIME CORPORATE SERVICES Firm Company 12226 S 1000 E STE #3 Address DRAPER, UT 84020 City/State and Zip Code LLCSUPPORT@PRIMECORPORATESERVICES.COM E-mail address to be used for future annual report not afformation concerning this matter, please call: ERS Name of Person Area Code Daytin check for the following amount: alling Fee \$\Bigcirc{\text{S}}{\text{S}}\$ \$30.00 Filing Fee & Certified Copy	

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

CHAMPIONCLIP ENTERPRISES LLC

2620) -9 PM 12: 44

(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears or mited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Con Florida document number 1.20000066589		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE.	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	red office address on ou	
		, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	iplete performance of my ut as provided for in Cha	duties, and I am familiar with and oter 605, F.S. Or, if this document is

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 ANGELA M HUERTA	8855 S.W. 19TH STREET	■ Add	
		MIAMI, FL 33165	☐ Remove
			☐ Change
		☐ Remove	
		Change	
			Remove
		☐ Change	
		Add	
		□ Remove	
		☐ Change	
		□ Add	
		☐ Remove	
		Change	
		□ Add	
		□ Remove	
		Change	

(If an effect Note: If	date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: Oth day after the record is filed.
Dated	March 5. 2020. Central Nampeo Signature of afficient or authorized representative of a member
	Cynthia A Champion
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00