## L20000713746

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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FEU 2.2 2021

## **COVER LETTER**

Registration Section

TO:

Division of Corp	porations		
THE BALL			
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
,	Kimone Hall, ACP		
		Name of Person	
	Ged Lawyers , LLP		
		Firm/Company	
	7171 N. Federal Highway		
		Address	
	Boca Raton FL 33487		
		City/State and Zip Code	
	Khall@gedlawyers.com	<u>,</u>	
	E-mail address: (	to be used for future annual report notif	fication)
For further information c	oncerning this matter, please ca	all:	
Kimone Hall		561 995-1966 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed 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 Addres	: <u>s:</u>	Street Address:	
Registration 5		Registration Sec	
Division of C P.O. Box 632		Division of Cor The Centre of T	-
Tallahassee.			e Street, Suite 810
i anamasee.	V	Tallahassee, FL	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE BALL POP LLC	
(Name of the Limited Liability Co (A Florida Limi	ompany as it now appears on our records.) ited Liability Company)
he Articles of Organization for this Limited Liability Complorida document number <u>L20000213746</u> .	pany were filed on 07/21/2020 and assigned
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited	liability company here:
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abbreviation "LLC"
nter new principal offices address, if applicable:	5400 OCEAN BLV
Principal office address MUST BE A STREET ADDRESS	S) APT 4-1
	SARASOTA, FL 34242
Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	
<ol> <li>If amending the registered agent and/or registered off gent and/or the new registered office address here:</li> </ol>	fice address on our records, enter the name of the new regist
Name of New Registered Agent: N/A	
New Registered Office Address:	Enter Florida street address 24 8
	, Florida
	S 49

## 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 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
MGR	KATYE KALIVODA	5400 OCEAN BLVD	<b>=</b> Add
		APT 4-1	□Remove
		SARASOTA, FL 34242	□Change
MGR	MEAGHAN MCLAUGHLIN	5400 OCEAN BLVD	<b>≅</b> ∧dd
		APT-4-1	□Remove
		SARASOTA, FL 34242	[]Change
			<u> </u>
			□ Remove
	• .	<u> </u>	· Change ·
			Add
			□Remove
•	, , , , , , , , , , , , , , , , , , ,	•	□ Change
			🗆 Add
		<u> </u>	□Remove
			□ Change
	<u> </u>		
			□Remove
			□Change

Katye Kal	ivoda, Manager		<u> </u>		
5400 Ocea	n Blvd				
Unit 4-1					
Sarasota,	71. 34242				
ME	19HAN MC	Laughlin, Ma	Nager		
	DO OCEAN Blue				<del></del>
-	CASOTA FL. 3	3 4 242			
		<u> </u>			
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					<del></del>
effective date e: If the dat	if other than the date of is listed, the date must be speed inserted in this block do etive date on the Departm	ecific and cannot be prior to does not meet the applicable	ate of filing or more than 9	(optional) 0 days after filing.) Pursuant t ments, this date will not b	o 605.0207 ( e listed as t
tiled.	1	, but not an effective time,	at 12:01 a.m. on the ea	rlier of: (b) The 90th day	after the
ed //	6/2021	<del></del>	a		

Typed or printed name of signee