120000237956

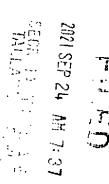
| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| İ |
| |
| |
| |
| |
| |
| |

Office Use Only



900373376089

09/24/21--01013--017 **25.00



OCT OF MI

COVER LETTER

| TO: Registration Se Division of Cor | | | |
|---|--|--|---|
| 2770 CHA. SUBJECT: | MPION LLC | | |
| | Name of Lin | nited Liability Company | |
| | Amendment and fee(s) are sulported and sees and sees and sees are sulported and sees are supported as a support of the sees are supported as a supported as a supported as a s | Ç | |
| | LAURA A. STREIMER | | |
| | | Name of Person | _ |
| STREIMER & FLUSBERG, P.A. | | | |
| Firm/Company | | | |
| 1361 SAWGRASS CORPORATE PARKWAY SUITE 100 | | | |
| | | Address | |
| | SUNRISE, FL. 33323 | | |
| | INFO@SFCPA.NET | City/State and Zip Code | 2021 SEP 24 SECRITALL/ |
| | | (to be used for future annual report notification) | SE SE |
| For further information c | oncerning this matter, please o | rall: | 2 |
| LAURA A. STREIMER | | 954 846-1100 at () | • • |
| Name o | f Person | Area Code Daytime Telephone Num | iber 73 |
| Enclosed is a check for th | ne following amount: | | |
| ■ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | Certified Copy Certificational copy is enclosed) Certificational copy is enclosed) | Filing Fee, icate of Status & ied Copy onal copy is enclosed) |
| | | | |

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Lim | ilted Liability Comp (A Florida Limited | any as it now appears on our Liability Company) | records.) | | - | |
|--|--|--|-------------------------|--------------|----------|---------------|
| The Articles of Organization for this Limited I | Liability Company | were filed on 08-06-2020 | | and | assigne | :d : |
| This amendment is submitted to amend the fol | llowing: | | | | | |
| A. If amending name, enter the new name | of the limited liab | oility company here: | | | | |
| NA | | | | | | |
| The new name must be distinguishable and contain the | words "Limited Liabi | ility Company," the designation | "LLC" or the | abbreviation | "L.L.C." | , |
| Enter new principal offices address, if appli | 14808 DEATON ALY | | | | | |
| (Principal office address MUST BE A STRE | ORLANDO, FL. 32827 | | | | | |
| | | | | | | 1 |
| | | | | Fig. | 2021 | ; |
| Enter new mailing address, if applicable: | | 14808 DEATON ALY | | | SEF | 77 |
| (Mailing address MAY BE A POST OFFICE BOX) | | ORLANDO, FL. 32827 | | | 24 | रकत स्थान |
| | | | | 22.7 | J.Do | |
| | | | | Ţm | _4; 1 | |
| B. If amending the registered agent and/or agent and/or the new registered office addre | registered office a ess here: | address on our records, <u>e</u> | enter the na | me of the r | iew reg | istered |
| Name of New Registered Agent: | CHAMPION R | E INVESTMENTS, LLC | | | | |
| New Registered Office Address: | 14808 DEATO | N ALY | | | | |
| | | Enter Florida street d | address | | | |
| | ORLANDO | | _, Florida ³ | 2827 | | |
| | | City | _, | Zip Coa | le | |

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> | Address | Type of Action |
|---------------|--------------------------|-----------------------|--------------------|
| MGR | NIGEL BOGAERT | 2770-2774 SEAHORSE CT | |
| | | WINTER PARK,FL. 32792 | ■Remove |
| | | | □Change |
| MGR | CHAMPION RE INVESTMENTS, | 14808 DEATON ALY | = Add |
| | | ORLANDO, FL. 32827 | □Remove |
| | | | Change |
| | | | □Add |
| | | | |
| | | | Agad Remove |
| | | | The control Change |
| - | | | DAdd |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | |
| | | | |

| | | | _ |
|--|--|--|----------------|
| | | | |
| | · · · · · · · · · · · · · · · · · · · | | |
| | | | _ |
| | | | |
| | <u> </u> | | |
| | | | |
| | | <u> </u> | _ |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | _ |
| | | | 2021 |
| | | 3 C | 0 |
| | | 27 | _Ep 2 |
| | | <u> </u> | |
| | | | |
| | | | |
| | | 7 | 3 7 |
| | | | |
| ative date if other than the | data of filings | (| |
| effective date is listed, the date must | date of filing: | (optional) g or more than 90 days after filing.) Pursuant to 6 | 05.02 |
| If the date inserted in this blo iment's effective date on the De | ck does not meet the applicable statutory | y filing requirements, this date will not be li | isted |
| | | | |
| ord specifies a delayed effective filed. | date, but not an effective time, at 12:01 | a.m. on the earlier of: (b) The 90th day af | iter th |
| | 2021 | | |
| d 09/07 | | | |
| d | · · · · · · · · · · · · · · · · · · · | | |
| | signature of a member or authorized represen | > | |

Filing Fee: \$25.00