

h20000 284272

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(Address)

(Address)

(City/State/Zip/Phone #)

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2022 JUL 18 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WOLFPACK GYMNASTICS LLC.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

REBECCA SCHAER

Name of Person

WOLFPACK GYMNASTICS LLC.

Firm/Company

2514 RED BERRY WAY

Address

OCOE, FL 34761

City/State and Zip Code

WOLFPACK.ELITE@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

REBECCA SCHAER

760 500 - 3167
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 12, 2022

REBECCA SCHAER
2514 RED BERRY WAY
OCOOEE, FL 34761

SUBJECT: WOLPACK ATHLETICS LLC
Ref. Number: W22000091388

We have received your document for WOLPACK ATHLETICS LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The wrong Amendment Form was sent. I am enclosing the proper form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 722A00015486

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

2022 JUL 18 PM 2:56

WOLFPACK GYMNASTICS LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 07.18.2022 and assigned
Florida document number L20000284272.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

WOLFPACK ELITE LLC.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2514 RED BERRY WAY OCOEE, FL 34761

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2514 RED BERRY WAY OCOEE, FL 34761

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, **Florida**

Zip 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

[illegible]

2012 JUL 18 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FL

2072 JUL 18 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FL

7777

(If an effective 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 07 - 18, 2022

R. Schwan
Signature of a member or authorized representative of a member

REBECCA SCHAEER

Typed or printed name of signee

Filing Fee: \$25.00