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COVER LETTER

	of Corporations	
A & SUBJECT:	A Sports Cards and Collectables LLC	
SUBJECT.	Name of Limited Liability Company	
	cles of Amendment and fee(s) are submitted for filing. orrespondence concerning this matter to the following:	
	Lisa M. Ayala	
	Name of Person	
	A & A Sports Cards and Collectibles	
	Firm/Company	
	4766 Tramanto Lanc	
	Address	
	Wesley Chapel, Florida 33543	
	City/State and Zip Code nicehit@aasportscards2021.com	
	E-mail address: (to be used for future annual report notification)	
For further informa	nation concerning this matter, please call:	
Lisa M. Ayala	813 944-9429 at ()	
1	Name of Person Area Code Daytime Telephone Number	
Enclosed is a check	k for the following amount:	
■ \$25.00 Filing I	Fee	

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

A 3 A GPONG CARDO AND COLLECTABLES LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Con	npany were filed on 12/29/202	0 and assigned
Florida document number L21000007643		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
A & A Sports Cards and Collectibles LLC		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designati	on "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)		
		<u> 74</u>
B. If amending the registered agent and/or registered o	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:		<u></u>
	Enter Florida stre	et addrexs
		, Florida
	City	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 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
			□ Add
			[]Remove
			{ □ Change
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. mr	April 20th, 2021
fan eff <u>Note:</u>	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 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
recor d is fi	d 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 ed.
Dated	April 20th2921
∕alCU	

Typed or printed name of signee