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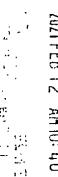
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TO:

	porations				
CT:	Pitbull Sp	orts Performance LLC			
	Name of Lim	ited Liability Company			
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eturn all correspo	ondence concerning this matter	to the following:			
		Sonia Becerra			
		Name of Person			
		Swyft Filings, LLC			
Firm/Company					
	3 (Greenway Plaza #1320			
Address					
		Houston, Texas 77046			
		City/State and Zip Code			
		-			
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er information c	oncerning this matter, please ea	all:			
Sonia B	есепа	at (877) 777-04	50		
Name o	f Person		e Telephone Number		
d is a check for th	no fallawina amaunt:				
	□ \$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)		
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	her information e Sonia B Name of d is a check for the control of the control	Name of Lim losed Articles of Amendment and fee(s) are subseturn all correspondence concerning this matter E-mail address: (ther information concerning this matter, please of the information concerning this matter. Sonia Becerra Name of Person MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	Name of Limited Liability Company losed Articles of Amendment and fee(s) are submitted for filing. eturn all correspondence concerning this matter to the following: Sonia Becerra		

Tallahassee, FL 32301

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



2021 FEB 12 AM 10: 40 PITBULL SPORTS PERFORMANCE 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 Company were filed on ______ 12/29/2020 ____ and assigned L21000007869 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Ignite Performance LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

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.

Cire

If Changing Registered Agent, Signature of New Registered Agent

_. Florida _

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		The David Bree		
<u>Title</u>	<u>Name</u>	Address	2021 FEB 12 AM 10: 40	Type of Action
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	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
	27 Jan 2021
Dated_	

Page 3 of 3

Filing Fee: \$25.00