

L21000020899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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To:

Mailing Address:

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

From:

Odam E Villegas Ortega

Address:

5246 Drift Tide Dr New Port Richey Florida 34652

Phone: 954-872-2664

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Mado Sports Corporation 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:

Odam E Villegas Ortega

Name of Person

Firm/Company

5426 Drift Tide Dr

Address

New Port Richey

City/State and Zip Code

Florida 34652

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

For further information concerning this matter, please call:

Odam E Villegas Ortega

at (954) 8722664

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

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

Mado Sports Corporation 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 January 07/2021 and assigned
Florida document number L21000020899.

This amendment is submitted to amend the following:

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

MADO SPORTS BUSINESS GROUP 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:

5426 Drift Tide Dr New Port Richey Florida 34652

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

PO Box 627 Elfers FL 34680

(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:

Odam E Villegas Ortega

New Registered Office Address:

5246 Drift Tide Dr

Enter Florida street address

New Port Richey

, Florida 34652

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 Changing Registered Agent, Signature of New Registered Agent

[illegible]

[illegible]

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.

2023

Signature of a member or authorized representative of a member

ODAM E. VILLEGAS ORTEGA
Typed or printed name of signee

Filing Fee: \$25.00