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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CHANCES MAKE CHAMPIONS, LLC

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Chances make champions, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document number L21000027405	were filed on 01/12/21	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	.LC" or the abbreviation "L.L.C."
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)		22
		;• <u></u>
		B
B. If amending the registered agent and/or registered office	address on our records, <u>ent</u>	er the name of the new regist
agent and/or the new registered office address here:		
At the state of th		1 5 T
Name of New Registered Agent:	W. 4. A. M.	<u>~</u>
New Registered Office Address:		
	Enter Florida street add	ress
		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
AMBR	Yasmine Rodriguez	7901 4th St N STE 300	XlAdd
		St. Petersburg FL 3370	02 □Remove
			□ Change
		in the state of th	🗆 Add
			□Remove
			□Change
	<u></u>		□Add
			□Remove
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			DAdd
			□Remove
			□Change
	(81) 86,000		□Add
		***************************************	□Remove
			□Change
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			□Remove
			□Change

				
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ective date, if other than the d effective date is listed, the date must b	ate of filing:	date of filing or more than	(optional)	0207
e: If the date inserted in this bloc	k does not meet the applicab	le statutory filing requir	ements, this date will not be listed	d as
ument's effective date on the Dep	artment of State's records.			
cord specifies a delayed effective of filed.	late, but not an effective time	e, at 12:01 a.m. on the e	arlier of: (b) The 90th day after	the
ed February 18	2022			
	·	. •		
	Rilux Pak			
Si	gnature of a member or authorize	zed representative of a mer	nber	