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Office Use Only



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2021 SEP -3 AHII: 35 SECRETARY OF SEPARATION OF SEPARATION

## **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

ATOM TOZEP.		ENE IMAGES, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	KELLY SMY		
	-	Name of Person	
	SPORTSCENE MEDIA, I	.I.C	
	<del></del> -	Firm/Company	
	12519 CROWN POINT C	IRCLE	
		Address	
	CLERMONT, FL 34711		
		City/State and Zip Code	
	CKSMY@ME.COM	To be used for future annual report not	itientiant
For further information c	oncerning this matter, please of		incanani,
KELLY SMY	•	407 - 694 - 5781	
Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration		<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Co	rporations
P.O. Box 632	27	The Centre of 1	LaHahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPORTSCENE IMAGES, LLC

( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now app Limited Liability Company	ears on our records.)		
The Articles of Organization for this Limited Liability C Florida document numberL21000032408	ompany were filed on	01/14/2021	and	assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ited liability company	<u>here</u> :		
SPORTSCENE MEDIA, LLC				
The new name must be distinguishable and contain the words "Lim	ited Liability Company," th	e designation "LLC" or th	ie abbreviation	"L.1C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	(ESS)		HS H	3 3
				ett an
			73.27 TO	(A.M.CRSS)
Enter new mailing address, if applicable:			o  o	( hand
(Mailing address MAY BE A POST OFFICE BOX)	***		<b>河</b> 克 章	3 3 3
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			10 CM	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	l office address on oui	records, <u>enter the n</u>	ame of the	new registered
	Enter F	lorida street address		
		, Florida		
	City	<del> </del>	Zip Co	de
New Registered Agent's Signature, if changing Registered	d Agent:			
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and caccept the obligations of my position as registered as being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance zent as provided for it	of my duties, and La a Chapter 605, F.S. (	ım familiar Or, if this de	with and ocument is

If Changing Registered Agent, Signature of New Registered Agent

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
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			□Remove
			□Change
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Filing Fee: \$25.00