## 121000039050

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Eiling Officer:	
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Office Use Only



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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:	Atlantic Sports	Holdings LLC	•		
SUBJECT.	·	nited Liability Company	·		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Elisabeth Velez			
		Name of Person			
	Atlantic	Sports Holdings LLC	<u> </u>		
Firm/Company					
	290	6 via Tuscany way			
Address					
	Ki	issimmee fl 34744			
		City/State and Zip Code		<del> </del>	
		lez123@gmail.com to be used for future annual re			
Car form on in formation of			port nonneation)		
ror turther information c	oncerning this matter, please c	an:			
Elisabet	th Velez	at ( <u>407</u> )	946-3485		
Name o	f Person	Area Code	Daytime Telepho	one Number	
Enclosed is a check for the	ne following amount:				
□ \$25.00 Filing Fee	\$30.00 Filing Fee &     Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address:  Registration Section  Street Address:  Registration Section		ion Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314 The Centre of Tallahassee  Tallahassee, FL 32314 2415 N. Monroe Street, St.					

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Atlantic Sports F	•		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appear d Liability Company)	rs on our records.)	<del>_</del>
The Articles of Organization for this Limited Liability Compar	ny were filed on	01/20/2021	and assigned
lorida document numberL21000039050			•
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited lia</u>	ability company he	ere:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the d	lesignation "LLC" 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)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our r	ecords, <u>enter the na</u>	me of the new regis
generality of the new registered office address here.			- :
Name of Marco Day Lange 1.4			• • • • • • • • • • • • • • • • • • •
Name of New Registered Agent:			<u> </u>
New Registered Office Address:			<u>.</u>
	Enter Flor	rida street address	. •
		, 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, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
	Santra Cardona	5528 Commerce Dr	<b>⊠</b> Add
		5528 Commerce Dr Orlando FC 37839	Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
<del></del>			□Add
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		<del></del>	□Remove
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Typed or printed name of signce