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Registration Section

Tallahassee, FL 32314

TO:

Division of Corp	porations		
	OCH ATHLETICS, LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Alberto Rodríguez, Esq., L	J.M.	
		Name of Person	
	D 1 10	, , , , , , , , , , , , , , , , , , , 	
	Dom Law, PA	Firm/Company	
		1.1116.Comban's	
	1814 N 15TH ST		
		Address	
	Tampa, FL 33605		
		City/State and Zip Code	
	Alberto@domlaw.com	to be used for future annual report not	fication)
Non-further information o	oncerning this matter, please of		
	Officering the matter. presse of		
Brad Pupello		703 851-5831 at ()	ne Telephone Number
Name o	f Person	Area Code Daytin	ne Telephone (Sumber
	L. C.H Say and comp.		
Enclosed is a check for the		Election Pill P	□ \$60.00 Filing Fee.
■ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre	ss:	Street Address:	
Registration Section		Registration Sc	
Division of C P.O. Box 631		Division of Co The Centre of	
Tallahassee.			be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MILA & LOCH ATHLETICS, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our rec- ited Liability Company)	urds.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L21000071105</u> .	oany were filed on 02/10/2010	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
M & L ATHLETICS, LLC		
The new name must be distinguishable and contain the words "Limited I	inbility 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	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u>:</u> :
B. If amending the registered agent and/or registered off	ice address on our records, <u>ent</u>	er the name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ada	Iress
		Florida Zip Code
	•	z.ip c.oae
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my duties, as provided for in Chapter 60	and I am familiar with and 5, F.S. Or, if this document 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
			Remove
			□Change
			🗆 Add
		□Rei	□Remove
			□Change
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fective date, if other than th	March 1, 20	21	(optional)	
n effective date is listed, the date mi	st be specific and cannot be prior	o date of filing or more than	90 days after filing.) Pursuant to	605.0207
ite: If the date inserted in this becament's effective date on the I	lock does not meet the applica	ibie statutory trinig requi	rements, this date witt not be	fisted as
• • • • • • • • • • • • • • • • • • • •	•			
ecord specifies a delayed effecti	re date, but not an effective ti	ne, at 12:01 a.m. on the	earlier of: (b) The 90th day :	after the
is filed.				
Adversals 7	2021			
nted March 3		<u> </u>		
	(Mar 3, 2021 17 02 EST)			
Brad Pupelli	(Mar 2, 2021 17 02 EST) Signature of a member or authority	rized representative of a mo	ember	-
Brad Pupello				

Filing Fee: \$25.00