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: (850)617-6383

From:

Account Name : SANCHEZ VADILLO LLP

Account Number : I20150000038 Phone : (305)485-9700

Fax Number : (

: (813)492-8840

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PADEL USA HOLDING LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PADEL USA HOLDING LLC		
(Name of the Limited Link (A Flor	ulity Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability		and assigned
Florida document number L21000122377	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the	abbreviation "L.I.C."
Enter new principal offices address, if applicable:		202
(Principal office address MUST BE A STREET ADD	DRESS)	
		20 - 20 - 20 - 20 - 20 - 20 - 20 - 20 -
		- <u> </u>
Enter new mailing address, if applicable:		a a
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>	37 0
		; 9
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, enter the na	ime of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	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

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>	Name	Address	Type of Action
MGR	BRION, OLIVIER	4060 WOODRIDGE ROAD	
		MIAMI, FL 33133	
			<b>=</b> Change
AMBR	LOUFRANI, SAMUEL	4060 WOODRIDGE ROAD	[::Add
		MIAMI, FL 33133	<b>\exists</b> Remove
			[] Change 😤
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Effecti	ve date, if other than the date of filing:  ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to fit date inserted in this black does not meet the applicable statutory filing requirements this date.	
Note:	if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be accords.	605.0207 (3 listed as the
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	Acri 10	
Dated _	April 15 2021	
	X Mary Q 1	
	Signature of a pleinber or authorized refree plative of a member	
	Macuel J Vadillo, Esq.	

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