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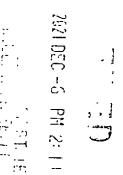
(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:]

Office Use Only



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A. BUTLER
DEC 1 5 2021

COVER LETTER

Registration Section Division of Corporations

TO:

subject: The Sp	OVTS Man Name of Lin	pagement & Ma nited Diability Company 1	rketing Group,
The enclosed Articles of Amenda	ment and fee(s) are sub	omitted for filing.	
Please return all correspondence	concerning this matter	to the following:	
_	Janat	han Gary, Si	₹
	_	Firm/Company	
_1	720 E.	Tiffany DRIVE,	# 101
	Mangoi	nia Park, FL	33407
	ona than (to be used for future annual report noti	tenter.com
For further information concerning	ng this matter, please c	all:	
Jonathan Ga Name of Person	ry, Sr.	at (954) 595- Area Code Daytim	-0302 ne Telephone Number
Enclosed is a check for the follow	ving amount:		
	80.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corpora P.O. Box 6327		Street Address: Registration Se Division of Cor The Centre of T	porations
Tallahassee, FL 323	14		e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

-1

Ine Sports Mc	anagement & Marketing Group Lele
(Name of the Educe	(A Florida Limited Liability Company)
The Articles of Organization for this Limited Li	ability Company were filed on 3 18/2021and assigned
Florida document number <u>L2100128</u>	548
This amendment is submitted to amend the following	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE I	BOX)
R If amending the registered agent and/or re	egistered office address on our records, <u>enter the name of the new registere</u>
agent and/or the new registered office addres	s here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing R	legistered 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>	<u>Name</u>	Address	Type of Action
MBR	Jonathan S. Gary Ge	1720 E. Tiffany Drivet	DL □Add
	J	1720 E. Tiffany Drivets Mangania Park, FL 3340	1. Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
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fecti	ve date, if other than the date of filing: (optional)
in eff	ective 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 605.0207
<u>ote:</u> scum	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
	on the on the population of State 3 records.
_{የተ} ረብተ	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is fil	ed.
ited.	November 29 2021
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(Signature of a member or authorized representative of a member
1	Signature of a member or authorized representative of a member Journal Lang Typed or printed page of signer