## L21000146452

(Requestor's Name)
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(Document Number)
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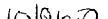
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10/01/21--01005--003 \*\*25.00





## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Dynamic Performance Challenge LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kelsey Weib-el Name of Person
Dynamic Performance Challenge, LLC
200 SE Kitching Circle
Stuart FL 34994 City/State and Zip Code
Dynamic performance challenge amail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (413) 313 - (334)  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  S25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited 1	COMMON CA Liability Compan Florida Limited Li	y as it now appears on ou ability Company)	r records.)		
The Articles of Organization for this Limited Liabi	lity Company v	vere filed on <u>03</u> 2	19/2021	and assigned	r r
This amendment is submitted to amend the followi	ng:				
A. If amending name, enter the new name of th	e limited liabil	ity company here:			
The new name must be distinguishable and contain the word	of initial Clability	Commony " the decignat	ion "I I C" or the ub	hrowintion "L. I. C."	<u>:</u>
Enter new principal offices address, if applicables of the containing the word of the containing the word of the containing the word of the containing the c	e:	Kelsey We	inel tching Cir . 34994		<del>-</del>  
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>'X')</u>				<u>-</u> 
B. If amending the registered agent and/or regi agent and/or the new registered office address b		ddress on our record	s, <u>enter the nam</u>	e of the new reg	<u>istéred</u>
Name of New Registered Agent:	Kelsey V	Neibel		<u> </u>	
New Registered Office Address:	200 S	E Kitching C	ICHE	<u> </u>	<del></del> ,
	Ş	Stuart City	, Florida	2490:24 Zip Codes	

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, 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
AMBR	Blake Balathunis	105 Post Office Park Wilbraham, MA 01095	□Add
		WIIDTANAM, MA 01045	NRemove
			□Change
			□ Add
			Remove .
			□ Change
			□Add
			Remove
			□Change
			\_ \_Add \_ \( \chi^2 \)
			□Remove
			□Change
			□Remove
			Change :
			□Add
			□Remove
			□ Change

. If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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(If an ef Note:	live date, if other than the date of filing: 03/29/2021 (optional) Tective 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 (3  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
he reco ord is f	rd 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 iled.
Dated	09/21/2021
	hear of
	Signature of a member or authorized representative of a member
	Lelsey Weibel

Filing Fee: \$25.00