Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GENERAL SOLUTIONS INC

Account Number : I20140000086

Phone

: (305)255-3310

Fax Number

: (305)255-3320

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AGR SPORTS LLC

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Estimated Charge

\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AGR SPORTS LLC				
(Name of the Limited) (A	Liability Comp Florida Limited	any as it now appears on our re Liability Company)	ecords.)	•
he Articles of Organization for this Limited Liab	ility Company	y were filed on 04/19/2021		_ and assigned
lorida document number L21000179318	·			
nis amendment is submitted to amend the following	ing:			
. If amending name, enter the new name of th	e limited lial	bility company here:		
ī/A			· · ·	202
ne new name must be distinguishable and contain the word	ls "Limited Liab	ility Company," the designation	"LLC" or the abbro	vìa ṇṇ "L.IC."
nter new principal offices address, if applicable	le:	N/A		HAY FEET
Principul office address MUST BE A STREET	(ADDRESS)		:	<u>- 트- 도출</u>
		<u> </u>		PH 0
nter new mailing address, if applicable:		N/A		. <u></u> Ξ
Muiling address MAY BE A POST OFFICE BO	<u>2X)</u>			
. If amending the registered agent and/or registered office address I	istered office here:	address on our records, e	nter the name o	of the new regis
Name of New Registered Agent:	FREIDER A	LBERTO ARROYAVE BAR	RIENTOS	
New Registered Office Address:	14352 SW 134TH AVE			
A STATE OF THE STA		Enter Florida street a		
	MIAMI		, Florida 3318	6
•		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:

22 000 | \$\frac{352}{52}\$

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	CLAUDIA BARRIENTOS	14352 SW 134TH AVE	□Add
		MIAMI, FL 33186	≅Remove
			□Change
MGR	Freider A. Arroyave Barrientos	14352 SW 134TH AVE	
		MIAMI, FL 33186	🗀 Rcmove
			□ Change
			Псточе
			Change
			□Add
		☐Remove	
			□ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove

N/A		
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	st be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant ock does not meet the applicable statutory filing requirements, this date will not be	
the record specifies a delayed effecti ecord is filed.	re date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	y after the
Dated MAY 20	2022	
	Signature of a member or authorized representative of a member	

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Typed or printed name of signee