Division of Corporations

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Doing so will generate another cover sheet.	5

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (813)436-5206

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

MULCIJ.					
		 			
 		 			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WEST AVENUE BOXING LLC

Certificate of Status	0
Certified Copy	0
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S. ROBERTS

JUL 1 2 2023

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Corporate Filing Menu

Help

7/11/2023 11:31:01 PDf

To: 18506176383

Page: 2/4

From: Registered Agents Inc.

Fax: 813436520£

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION. OF

West Avenue Boxing LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 04/23/21 and assigned document number L21000190863	
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liability company here:	
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."	_
Inter new principal offices address, if applicable:	_
Principal office address MUST BE A STREET ADDRESS)	_
inter new mailing address if applicable:	7
Inter new mailing address, if applicable:	_
Mailing address MAY BE A POST OFFICE BOX)	_
	
3. If amending the registered agent and/or registered office address on our records, enter the name of the new regist gent and/or the new registered office address here:	terec
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	_
	_
ew 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.

To: 18506176383

Page: 3/4

From: Registered Agents Inc.

Fax: 8134365(

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	DAVTYAN, ARAM	1521 ALTON DR. #685	□Add
		MIAMI BEACH, FL 33139	⊠ Remove
			Change
			□Add
			□Remove
			☐ Change
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d cannot be prior to	date of filing or m	ore than 90 days after	filing.) Pursuant to 60:	
et an effective tim	ne, at 12:01 a.m. o	on the earlier of: (b	The 90th day afte	er the
2023				
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1 5	d cannot be prior to meet the applical State's records.	meet the applicable statutory filing State's records. t an effective time, at 12:01 a.m. o	d cannot be prior to date of filing or more than 90 days after meet the applicable statutory filing requirements, this State's records.	d cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 meet the applicable statutory filing requirements, this date will not be list State's records. It an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the state of the

Typed or printed name of signee