## N21000344116

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2022 MAR 16 AM 5:50 SECRENARY DE STATE

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## **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

	orts Modeling, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Charles Gamble		
		Name of Person	
		Firm/Company	<u> </u>
	3930 N. 56th Avenue, #40	4	
		Address	
	Hollywood, FL 33021		
		City/State and Zip Code	
	gamblesportsmedia@gmail		
For further information c	E-mail address: ( concerning this matter, please c	to be used for future annual report noti	fication)
Charles Gamble		786 308-6301	
Name of Person		at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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 Addres Registration S		<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 6327 The Centre of Tallahassee			Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAR 16 AM 5: 50

Gamble Sports Modeling, LLC

(Name of the Limited Liability Company as it now appears on our records): IABY OF STATE
(A Florida Limited Liability Company)

TALLAHASSEE, F1.

Florida document number L21000344115	ompany were filed on 07/29/2021	and assigned
	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:	l office address on our records, <u>ente</u>	r the name of the new registered
New Registered Office Address:		
New Registered Office Address:	Enter Florida street addr	755
New Registered Office Address:		
	. F	loridaZip Code
New Registered Office Address:  New Registered Agent's Signature, if changing Registered  I hereby accept the appointment as registered agent of	. F	lorida

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			DAđd
			□Remove
			☐Change
			□Add
			□Remove
			□Change
			□Add
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<del></del>			□Add
		□Remove	
			☐ Change
			□Add
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			□Change
			□Add
			□Remove
			□ Change

	Article III: Name, image and likeness marketing and sports marketing
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ffect	ive date, if other than the date of filing: (optional)
an ef	fective 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 (
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as thent's effective date on the Department of State's records.
recor	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
d is ti	led.
	March 15 2022 _
Dated	- 1022 · · · · · · · · · · · · · · · · · ·

Filing Fee: \$25.00