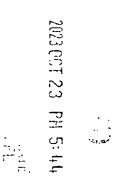
## 621000383360

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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## **COVER LETTER**

	tion Section
	SPORTS, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Art	eles of Amendment and fee(s) are submitted for filing.
Please return all c	prrespondence concerning this matter to the following:
	RICHARD C. MILLIAN
	Name of Person
	MILLIAN LAW GROUP
	Firm/Company
	2925 ALT 19 N., SUITE B
	Address
	PALM HARBOR, FL 34683
	City/State and Zip Code
	RICK@MILLIANLAW.COM
	E-mail address: (to be used for future annual report notification)
For further inform	ation concerning this matter, please call:
RICHARD C. MI	LIAN 813 200-5894
	Name of Person Area Code Daytime Telephone Number
Enclosed is a chec	k for the following amount:
<b>■</b> \$25.00 Filing	Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahanna El 22214

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIP SPORTS, LLC

SIP SPORTS, LLC			2023 (ICT 23	PH 5-11
(Name of the Lim	ted Liability Company as it now (A Florida Limited Liability Con	appears on our i	records.)	<u>. (                                   </u>
The Articles of Organization for this Limited I Florida document number L21000383360	iability Company were filed	on <u>09/18/2014</u>	08/26/2021	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability comp	any here:		
The new name must be distinguishable and contain the	words "Limited Liability Company	v." the designation	"LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<i>BOX</i> )			<del></del>
				<del> </del>
B. If amending the registered agent and/or agent and/or the new registered office addre		our records, g	enter the name o	of the new registered
Name of New Registered Agent:				**************
New Registered Office Address:	2925 ALT 19 N., SUITE B	1		
	En	iter Florida street .	address	
	PALM HARBOR		Florido 34683	<b>;</b>

## 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.

City

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	<u>Address</u>	Type of Action
MGR	MARK BRUSESKI		□Add
	•	<u></u>	■ Remove
			Change
MGR	ROBERT PULSIPHER		
			□ Remove
			□Change
			□Add
			\ Remove
			□ Change
			□Remove
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Effective date, if	other than the	date of filin	g:			(option:	al)	
(If an effective date is Note: If the date i	listed, the date mus	t be specific and	d cannot be price	or to date of fili	ng or more than '	90 days after fili	ing.) Pursuant to $\epsilon$	305.0207 (3
document's effecti	ive date on the De	epartment of S	State's record	ls.	i y minig redum	ements, mis u	ate will not be i	isicu as ti
ne record specifies a	a delayed effective	date, but not	an effective	time, at 12:0	a.m. on the ea	arlier of: (b)	The 90th day at	fter the
ord is filed.							·	
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Dated SEPTEMBI	ER 28	<del></del>	, 2023					
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