

L21000 414520

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(Address)

(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Strategic Global Sports Advisors, 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:

LaTrenda S Thomas
Name of Person

Strategic Global Sports Advisors, LLC
Firm/Company

6220 Lobelia Street
Address

Jacksonville FL 32209
City/State and Zip Code

strategicglobalsportsadvisors@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LaTrenda S. Thomas at (850) 251-4450
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & 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**

Strategic Global Sports Advisors, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2022 NOV 28 PM 2:44

The Articles of Organization for this Limited Liability Company were filed on Sept 20, 2021 and assigned Florida document number L21000414520

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6220 Lobelia Street
Jacksonville, FL
32209

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2720 NW 9th Court
Pompano Beach, FL
33069

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

La'Trenda S. Thomas

New Registered Office Address:

6220 Lobelia Street

Enter Florida street address

Jacksonville

City

Florida

32209

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.

La'Trenda S. Thomas

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:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|------------------------|-------------------------------|--|
| <u>MGR</u> | <u>LaTrenda Thomas</u> | <u>6220 Lobelia Street</u> | <input type="checkbox"/> Add |
| | | <u>Jacksonville, FL 32209</u> | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| <u>AMBR</u> | <u>LaTrenda Thomas</u> | <u>6220 Lobelia Street</u> | <input type="checkbox"/> Add |
| | | <u>Jacksonville FL 32209</u> | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| <u>AMBR</u> | <u>Timothy E James</u> | <u>6220 Lobelia Street</u> | <input type="checkbox"/> Add |
| | | <u>Jacksonville FL 32209</u> | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| <u>MGR</u> | <u>Timothy E James</u> | <u>6220 Lobelia Street</u> | <input checked="" type="checkbox"/> Add |
| | | <u>Jacksonville FL 32209</u> | <input type="checkbox"/> Remove |
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[illegible]

(If an effective 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)(b)

Dated November 21, 2022

Timothy E. AMES
Typed or printed name

Typed or printed name of signee