## L22000015249

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## **COVER LETTER**

	gistration Sec vision of Corp		<del>-</del> .	•		
CHIPS HE SOT	Apex Shooti	ng Center LLC		,		
SUBJECT:	Name of Limited Liability Company					
The enclosed	i Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	dence concerning this matter	to the following:			
		Maryanne Ward				
			Name of Person			
		Apex Shooting Center, LL	С			
	Firm/Company					
		45 Moody Street, B408				
	Address					
		Waltham, MA 02453				
			City/State and Zip Code			
		mward@cricketholdings.co	m to be used for future annual report notification	<u>, , , , , , , , , , , , , , , , , , , </u>		
For further i	nformation co	ncerning this matter, please ca	•	''		
Maryanne V	Vard		781 478-7687 at ( )			
	Name of	Person	Area Code Daytime Telep	phone Number		
Enclosed is	a check for the	e following amount:				
\$25.00 1	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 Address: Registration Section Division of Corporations P.O. Box 6327

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Apex Shooting Center, LLC	ACCEPTANCE OF THE CONTRACT OF
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L22000015249	were filed on January 6, 2022 and assigned.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabile Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "LLC" or the abbreviation "L.L.C."  5320 Powerline Road, Ft. Lauderdale, FL 33309
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	5320 Powerline Road, Ft. Lauderdale, FŁ 33309
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida City Zip Code
	City City

## 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 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>	Address	Type of Action
AMBR	Matthew McLaughlin	5320 Powerline Road, FT Lauderdale, FL 33309	O9
			□Remove
			Change
AMBR	Christian Bowen	5320 Powerline Road, FT Lauderdale, FL 33309	<b>≡</b> Add
			□ Remove
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. If amending any other i	information, enter c	hange(s) here:	Attach additiona	il sheets, if necess	ary.)		
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Effective date, if other t	han the data of film			(antion	. IX		
(If an effective date is listed, the Note: If the date inserted document's effective date	date must be specific and in this block does not n	l cannot be prior to d neet the applicable		than 90 days after tili	ing.) Pursuant to		
he record specifies a delayed ord is filed.	I effective date, but not	an effective time.	at 12:01 a.m. on t	he earlier of: (b)	The 90th day a	ifter the	
June 16 Dated		2022					
		·			IALL.	2022	
	Signature of a r	member or authorize	ed representative of a	ı member	ATASS	1 NOF 2302	1.
Victor Grillo					88. E	17	1

Filing Fee: \$25.00

Typed or printed name of signee