## L22000040914

(Re	questor's Name)	
(Ad	dress)	-
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
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(Do	cument Number)	
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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FILED SECRETARY OF STATE V OF CORROBATIONS

## **COVER LETTER**

FO: Registration Se Division of Cor		•	
Awayfeam	Travel, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<u></u>
	Amendment and fcc(s) are sub		
	Tyler Overstreet	· ·	
٠	AwayTeam Travel, LLC	Name of Person	<del></del>
	600 Cleveland Street, Suite	Firm/Company	
	Clearwater, Florida 33755	Address	
	toverstreet@sportsfacilities		
English to inframation o		to be used for future annual report note	ication)
Tyler Overstreet	concerning this matter, please c	727 474-3845	
Name o	of Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	S30.00 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 Addre	ss:	Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

AwayTeam Travel, LLC

(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears ability Company)	on our records,)	
The Articles of Organization for this Limited Liability Company of E22000040914  Florida document number	vere filed on 01/21	1/2022 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company her	œ:	
The new name must be distinguishable and contain the words "Limited Liabilia	ty Company," the des	signation "L.L.C" or the abbreviation "L.L.C."	-
Enter new principal offices address, if applicable:			_
(Principal office address MUST BE A STREET ADDRESS)			-
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			-
B. If amending the registered agent and/or registered office as agent and/or the new registered office address here:	ddress on our rec	cords, enter the name of the new regist	 ered
Name of New Registered Agent:			_
New Registered Office Address:			
	Enter Florid	da street address	_
		, Florida Zip Code	_
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of n rovided for in Cl	my duties, and I am familiar with and hapter 605, F.S. Or, if this document is	

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>	Name	Address	Type of Action
MGR	Jason Clement	600 Cleveland Street, Suite 910, Clearwater, FL 33755	
			□Add
			■ Remove
			□ Change
MGR	Sports Facilities Companies (U.C.	600 Cleveland Street, Suite 910, Clearwater, FL 33755	<b>=</b> Add
			□Remove
			_
			_
			□Remove
			□Change
			ERemove
			Change
			□Remove
			[]Change
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ective date, if other than the neffective date is listed, the date ma	e date of filing:	nrior to date of filing or n	option:	al) ing ) Pursuant to 605.0207 (
te: If the date inserted in this becament's effective date on the L	lock does not meet the ap	plicable statutory filir	ng requirements, this d	ate will not be listed as t
ecord specities a delayed effecti s filed.	ve date, but not an effectiv	vo time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
August 22	2022	···		
<del></del>	Signature of a member or a	2	of a member	
	Signature of a member of a	uthorized representativ		

Filing Fee: \$25.00