

L22000248518

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

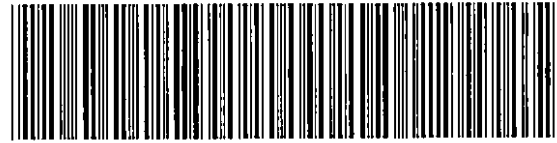
(Business Entity Name)

(Document Number)

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2023 MAY 18 AM 7:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

A. RIVERS

JUL 17 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Athletes First Initiative, 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:

Robert Crews

Name of Person

Firm/Company

1404 N. Ronald Reagan Blvd.

Address

Longwood, FL 32750

City/State and Zip Code

info@athleteforward.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Crews

941

916-4005

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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**

Athletes First Initiative, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/20/2022 and assigned
Florida document number L22000278578.

This amendment is submitted to amend the following:

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

Athletes Forward Initiative, LLC.

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)

1275 Lake Heathrow Lane

Suite 105

Lake Mary, FL 32746

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1275 Lake Heathrow Lane

Suite 105

Lake Mary, FL 32746

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:

Solutions Group Accounting Firm, Inc.

New Registered Office Address:

1275 Lake Heathrow Lane, Suite 101

Enter Florida street address

Lake Mary

Florida 32746

City

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.

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>
AMBR	Agnes Management, LLC.	1275 Lake Heathrow Lane	<input type="checkbox"/> Add
		Suite 105	<input type="checkbox"/> Remove
		Lake Mary, FL 32746	<input checked="" type="checkbox"/> Change
AMBR	Profectus Management, LLC.	1275 Lake Heathrow Lane	<input type="checkbox"/> Add
		Suite 105	<input type="checkbox"/> Remove
		Lake Mary, FL 32746	<input checked="" type="checkbox"/> Change
AMBR	Dr. Matt Wilson Consulting, LLC.	104 Deep Woods Way	<input checked="" type="checkbox"/> Add
		Ormond Beach, FL 32714	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Slick Top Management, LLC.	1404 N. Ronald Reagan Blvd.	<input type="checkbox"/> Add
		Suite 1120	<input checked="" type="checkbox"/> Remove
		Lengwood, FL 32750	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

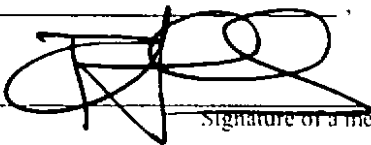
I recently sent in a amendment form and forgot to change one of the AMBR, the rep I spoke with on the phone stated that I would have to send a new amendment form and payment to make the changes. This is the final version of the changes needed.

E. Effective date, if other than the date of filing: _____ **(optional)**

(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) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated May 5th, 2023


Signature of a member or authorized representative of a member

Robert Crews
Typed or printed name of signee