## 622000334/5/

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**班班罗斯亚** 

R. HUNT 04/04/23

## **COVER LETTER**

TO: Registration Se Division of Co					
TMRW Ar	ena, LLC				
SUBJECT:					
<del></del>	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	Christopher Murvin				
		Name of Person			
	TMRW Sports				
		Firm/Company			
	807 S. Orlando Avenue, Su	iite J		2863	
		Address			
	Winter Park, FL 32789			·E	;
	Chris.Murvin@tmrwsportsg	City/State and Zip Code group.com	ESTA ESTA	PH 12: 51	Ö
	E-mail address: (	to be used for future annual report noti	fication) [7]	g,	
For further information	concerning this matter, please c	all:			
Christopher Murvin	-	407 625-4168			
Name	of Person	at () Area Code Daytim	e Telephone Number	_	
Enclosed is a check for t	he 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 Certificate of Certified Cop (additional copy	Status &	
Mailing Addre		Street Address:	ution		
Registration Division of 0		Registration Se Division of Cor			
P.O. Box 633		The Centre of T			
Tallahacege			e Street Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TMRW	Arena, LLC	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records. ad Liability Company)	.)
The Articles of Organization for this Limited Liability Comparation for the Limited Liability Comparation document number [L2200033415]	ny were filed on July 28, 2022	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
FMRW Studio, LLC		
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		الله الله الله الله الله الله الله الله
Principal office address MUST BE A STREET ADDRESS)		3
		福 里 川
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		. TE
The state of the s		
3. If amending the registered agent and/or registered office and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	ee address on our records, enter t	
	. Flo	eid.
	City F10	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 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	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
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an effective date is listed, the date note:  ote: If the date inserted in this								
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