L22000418222

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COVER LETTER

TO: Registrati Division o					
OTTO TE CO		RTING GOODS LLC			
SUBJECT:		Name of Lim	ted Liability Company		
The enclosed Artic	les of Ai	nendment and fee(s) are sub	nitted for filing.		
Please return all co.	rrespond	lence concerning this matter	to the following:		
		FRANCISC	O A ROJAS COLLORIDI		
			Name of Person		
	FCR SPORTING GOODS LLC				
	Firm/Company				
	10200 WEST STATE ROAD 84 # 213				
			Address		
		DAVII	E. FLORIDA 33324		
			City/State and Zip Code		
			scoroco@yanoo.com		
			o be used for future annual report notification)		
For further informa	ation con	cerning this matter, please c	ill:		
FRANCISCO A I	ROJAS (COLLORIDI	954 676-0714 at()		
```	Name of P	erson	at () Area Code Daytime Telephone N	umber	
Enclosed is a check	k for the	following amount:			
■ \$25.00 Filing I	Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	.00 Filing Fee, rtificate of Status & rtified Copy litional copy is enclosed)	
<u>Mailing A</u> Registra		ection	Street Address: Registration Section		
Division	of Co	rporations	Division of Corporations The Centre of Tallahassee		
P.O. Bo: Tallahas			2415 N. Monroe Street, Su	iite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FCR SPC	ORTING GOODS LLC	
(Name of the Limite	d Liability Company as it now appears on our reco A Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Lia	ability Company were filed on 09/26/2022	
Florida document number L22000418222		
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "L	LC" or the abbreviation "EL.C."
Enter new principal offices address, if applica	ible:	, , , , , , , , , , , , , , , , , , ,
(Principal office address MUST BE A STREE)	T ADDRESS)	
		-5
		<u>ත</u>
Enter new mailing address, if applicable:		·
(Mailing address MAY BE A POST OFFICE I	<u> </u>	
B. If amending the registered agent and/or re agent and/or the new registered office addres		er the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	lia.
	Emer Pioriaa Mreet daa	11 (2.0)
	Cits	FloridaZip Code
	CIG	np cour

## 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 a provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with a accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docume 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 Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	FEDERICO RAMIREZ	16325 GOLF CLUB RD APT 307	
		WESTON FLORIDA 33028	■Remove
			□Change
			\@Add
			□Change
			□Remove
			Change
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			(T) (T)

	ITION MEMBER'S CAPITAL:	
FRANCISCO A ROJAS C	COLLORIDI 100% OF CAPITAL	
		073
<u></u>		
	<u> </u>	
		<u>න</u>
fective date, if other than th	ne date of filing:	(optional)
n effective date is listed, the date ma	ust be specific and cannot be prior to date of	filing or more than 90 days after filing.) Pursuant to 605.0, atory filing requirements, this date will not be listed
cument's effective date on the	Department of State's records.	
ecord specifies a delayed effecti is filed.	ive date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) The 90th day after t
AUGUST 8	2023	
ted	· . 7	
	<u> </u>	

Typed or printed name of signee