L23000149421

(Re	questor's Name)	
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	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	у
	A. R	IVERS

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08/22/23--01008--007 **25.00



IMPORTANT NOTICE



INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST

RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

Inc Authority Florida

- TO: PHYSICAL: Dept. of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
- MAILING: Dept. of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314
- FROM: Ine Authority, LLC 1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852
- DATE: Wednesday, August 16, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

Articles of Amendment
For: <u>ANDREW SPORTS, LLC</u>

We have included payment in the amount of <u>\$25.00</u> for the following fees:

Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT: ANDREW SPORTS, 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:

Corporate Maintenance Lead

Name of Person

Processing Department

Firm Company

1450 Vassar St

Address

Reno, NV 89502

City State and Zip Code

candrew303@gmail.com

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

For further information concerning this matter, please call:

at (800 Area Code) 638-2320 Daytime Telephone Number Processing Department

Name of Person

Enclosed is a check for the following amount:

S25.00 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/COURIER ADDRESS:

Registration Section Division of Corporations **Clifton Building** 2661 Executive Center Circle Tallahassee, FI, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANDREW SPORTS, LLC (<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 03/24/23 and assigned Florida document number L23000149421 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ANDREW SPORTS & MARKETING, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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: New Registered Office Address: Enter Florida street address

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.

 C_{HV}

If Changing Registered Agent, Signature of New Registered Agent

_. Florida ____

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

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Title	Name	Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: N/A (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) <u>Note:</u> 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 August 16 2023 Indran Conflictor Signature of a member or authorized representative of a member-Andrew Cunningham Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00