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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Dink On Pickleball, "LFC" 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:
Tray A. Robinson Name of Person
Dink On Pickleball "Fgc" Firm/Company
1311 Diamond Lake Cir
Haplos, FL 34114 City/State and Zip Code + racy adinkon pickleball. com E-mail/Address: (to be used for future annual report notification)
E-mailddress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tray Rubinson at (520) 458-6878 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
■ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, 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

DINK ON PICKLEBALL "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 Comp	any were filed on Apr	11 12, 2003 and assigned
Florida document number <u>L23000180345</u> .	,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	MA
The new name must be distinguishable and contain the words "Limited I	liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		202
		î î
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
		
		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here: κ	ice address on our reco A	rds, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Addiess.	Enter Florida	street address
		, Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my as provided for in Cha	duties, and I am familiar with and pter 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	James E. Robinson	1311 Diamend falce Cir	🗀 Add
		1311 Diamond falce Cir Naples, Ff 34114	Remove
			□Change
			□ Add
			□Remove
			Change
			□Add
			□Change
			□Remove
			🗆 Change
			□Add
			□Remove
			Change
			□Add
			□Remove
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ote:	ve date, if other than the date of filing:
record is file	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
	June 27 2024
ited_	
ated _	Signature of a member or authorized representative of a member

Filing Fee: \$25.00