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COVER LETTER

Registration Section

TO:

Division of Corporations					
	DYLUKAS LLC				
SUBJECT:	Name of Limit	ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.			
Please return all correspo	ondence concerning this matter to	o the following:			
	Lukas Ostermann				
		Name of Person			
	COACHEDYLUKAS				
		Firm/Company			
	950 Broken Sound Pkwy N	W #1107			
		Address			
	Boca Raton 33487				
		City/State and Zip Code			
	lukas@newgensportsgroup.c				
	E-mail address: (to	be used for future annual report not	tification)		
For further information of	oncerning this matter, please ca	II:			
Lukas Ostermann		561 7745231 at ()			
Name of Person			ne Telephone Number		
Enclosed is a check for the	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 Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section		Street Address: Registration Se			
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee		
Tallahassee, 1			pe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COACHEDYLUKAS LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our re I Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Compan	y were filed on <u>04/19/2023</u>	and assigned
lorida document number 1.23000187926		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited lia	bility company here:	
BALL MASTERS FLORIDA LLC		
he new name must be distinguishable and contain the words "Limited Lial	bility 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)		② 20
		2023 SEP
Inter new mailing address, if applicable:		
•	-	
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	e address on our records, <u>e</u>	nter the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
		. Florida
	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>	Name	Address	Type of Action
MGR	JOHAN MAURITZSON	6031 Spencer Avenue	■Add
		Bronx, NY 10471	□Remove
			Change
			□Remove
			Change
			□Remove
			□Change
			□Add
			□ Remove
			□ Change
			□ Add
			□Remove
			□Change
			□Add
			□ Remove
			□ Change

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-		
Effective date, if other than the liften effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	ist be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 clock does not meet the applicable statutory filing requirements, this date will not be listed)207 d as
ne record specifies a delaye The 90th day after the rec	ed effective date, but not an effective time, at 12:01 a.m. on the earlier cord is filed.	r of
Dated	Boca Raton	
<u></u>	Signature of a member or authorized representative of a member	
Lukus Ostassassas	Signature of a member or authorized representative of a member	
Lukas Ostermann	Typed or printed name of signee	