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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPANY COMBO, LLC

Account Number : 120160000033

Phone : (866)428-2930 : (407)308-0481 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Rmail Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SPORTSPLUS, LLC

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## **COVER LETTER**

TO: Registration Se Division of Cor		•	•
SPORTSPI		•	
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	LUIS LUGO		
	<del></del>	Name of Person	
	GLOBALFY, LLC		
		Firm/Company	
	7345 W SAND LAKE RD	SUITE 210	V7 ~
		Address	<b>023</b>
	ORLANDO, FL 32819		SE IVA
		City/State and Zip Code	335 9.88 9.
	DOCS@GLOBALFY.COM	d (to be used for future annual report notification)	Pat
For further information c	concerning this matter, please c	•	2023 JUN 26 PM 12: 56 SECRETARY OF STATE ALLAHASSEEL CLORID!
LUIS LUGO		866 4282030	
Name o	f Person	Area Code Daytime Telephone Number	_
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing F  Certified Copy Certificate of \$     (additional copy is enclosed) Certified Copy     (additional copy is	Status &
MailingAddres Registration S	Section	StreetAddress: Registration Section	
Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee	
Tallahassee, l		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Page: 3 of 5

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPORTSPLUS, LLC		
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records. inbility Company)	)
The Articles of Organization for this Limited Liability Company villorida document number L23000233810	and assigned	
This amendment is submitted to amend the following:		
this amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  Inter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address on our records, enter the name of the name registered.		
The new name must be distinguishable and contain the words "Limited Liability	ty 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)		219. 20
		- :- 23
Fotor new mailing address if applicable		A NU SVH
(Mailing address MAY BE A POST OFFICE BOX)		500
R. If amending the registered agent and/or registered office a	ddress on our records, enter th	
agent and/or the new registered office address here:	adiess on our records, enter a	it mine of the new regimerest
Name of New Registered Agent		
New Registered Office Address:	Enter Florida street address	·
	Flor	rida
	Cuy	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and rovided for in Chapter 605, F.	H am familiar with and S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

To: FL - STATE AMENDMENTS Page: 4 of 5 2023-06-26 15:20:57 GMT 14073080481 From: Diego Sampaio

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

Title	<u>Name</u>	Address	Type of Action
AMBR	CANDY S. RODRIGUEZ ROJAS	EL ENCUENTRO CALLE SALAMANÇA	DAdd
		CASA 43, PLAYA DEL CARMEN	=Remove
		QUINTANA ROO, 77724 - MEXICO	□ Change
AMBR	JOSE D. MORLES RODRIGUEZ	1555 SW 109TH AVE APTO 107	
		PEMBROKE PINES, FL 33025	Remove
			_
			□Add
			2023 JUN 26 P)
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			□ Change
			🗆 Add
			DRemove
			☐ Change
			🖸 Add
			□Remove

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Page: 5 of 5

	DDRESS: EL ENCUENTRO CALLE SALAMANCA CASA 43, PLAYA DEL CARMEN.	
QI	UINTANA ROO, 77724 - MENICO	
Al	DD: JOSE DAVID MORLES RODRIGUEZ - TITLE: AMBR	
A	DDRESS: 1555 SW 109TH AVE APTO 107 PEMBROKE PINES, FL 33025	
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	S A R	PH 12: 56
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ffectiv	e date, if other than the date of filing: (optional)	
iote; li	ctive 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, if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.	0207 (3) d as the
locume	nt's effective date on the Department of State's records.	
record	specifies a delayed effective date, but not an effective time, at 12:01 a million the earlier of: (b). The 90th day after	the
d is tile		
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