## L23000253799

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## **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
	IN SPOT GROUP LLC		
SUBJECT:	Name of Lim	med I rability Company	<del>.</del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Javier Serpa		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	SPORTS TOBACCO DIS	TRIBUTION LLC	
		Firm-Company	
	5600 SW 125TH AVE		~3
		Address	
	MIAMI, FL 33183		 1
		City'State and Zip Code	
	sportstobaccodist(q gmail.co		-1 .:
Dan Bankar in Franciscian	E-mail address: ( concerning this matter, please c	to be used for future annual report not	tication) ූි දා ප
	oncerning this matter, picase c		
Javier Serpa		786 817-9848 at ()	
Name o	if Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
LI \$25,00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	El \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	[1] \$60.00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed)
Mailing Address		<u>Street Address:</u> Registration Sc	ction
Registration S Division of C		Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit)	ed Liability Company as it now appears on our records.) (A Horida I imited Liability Company)
The Articles of Organization for this Limited Li Florida document number 1.23000253799	ability Company were filed on Florida and assigned and assigned
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	the limited liability company here:
	<del>-</del>
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applications	able:
•	
(Principal office address MUST BE A STREE	1 ADDA(33)
	1.3
	ຸ ກ
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE)	<u>BON)</u>
B. If amending the registered agent and/or reagent and/or the new registered office address	
Name of New Registered Agent:	Javien Senper.  300 sw 107 ave 4209 Wiami PC 3317  Enter Florida street address  Wiam: FL Florida 33174  Zip Code
New Registered Office Address:	300 SW 107 QUE #209 Wiantife 3317
	Mian. Fl. Florida 33174

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

company has been notified in writing of this change.

New Registered Agent's Signature, if changing Registered Agent:

THE GREEN SPOT GROUP LLC

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	I vpe of Action
MGR	SPORTS TOBACCO DISTRIBUT	300 SW 107 AVEMIAMI, FL 33174	□Add
			Remove
MGR	Javier Serpa	300 SW 107 AVEMIAMI, FL 33174	■Add
			☐Remove
			ı □Add
			⊡Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
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If the date insert	ted in this block does ate on the Departmen	not meet the a	ipplicable statutor	y filing requiren	ents, this date w	ill not be list
						and the second
rd specifies a del: iled.	iyed effective date, b	ut not an effec	tive time, at 12:0	a.m, on the earl	ier of: (b) The	90m day are
11-01-2023						
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