L23000311064

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COVER LETTER

TO:	Registration Se Division of Cor		•				
SUBJ		S BAR & LOUNGE LLC					
ЭОБЭ	BC1.	Name of Lin	nited Liability Company				
The en	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please	return all correspo	ondence concerning this matter	to the following:				
		ALEJANDRO ANGLADA	4				
			Name of Person				
		45 SPORTS BAR & LOU	NGE LLC				
Firm/Company							
		1803 SPRINGTIME AVE					
			Address				
		CLEARWATER, FL 33755					
		CLEARWATER. FL 33755 City/State and Zip Code Van glada 233@gmail.com					
			- J				
For fur	rther information c	E-mail address: (oncerning this matter, please c	to be used for future annual report no all:	tification)			
ALEJANDRO ANGLADA		706 662 3891					
	Name o	f Person		me Telephone Number			
Enclos	ed is a check for th	ne following amount:					
> \$2	5.00 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:	ection				
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee						
	P.O. Box 632	7	The Centre of	Tallahassee			
	Tallahassee, I	FL 32314	2415 N. Monro	oe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

45 SPORTS BAR & LOUNGE 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 Company were filed on $\frac{06/28/2023}{1}$ and assigned Florida document number <u>L23000311064</u> This amendment is submitted to amend the following: A. 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." 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.

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	Name	<u>Address</u>	Type of Action
AMBR	ROBERTO ANGLADA	1803 SPRINGTIME AVE	= Add
		CLEARWATER, FL 33755	□Remove
			
			□Remove
		-	□ Change
			□Add
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f an effective date is Note: If the date i	other than the date olisted, the date must be spenserted in this block do ve date on the Departm	ecific and cannot be prior ses not meet the applic	to date of filing or mor able statutory filing	(optiona re than 90 days after filir requirements, this da	ng.) Pursuant to 605.0207
e record specifies and is filed.	delayed effective date,	but not an effective ti	me, at 12:01 a.m. or	the earlier of: (b)	The 90th day after the
Dated		:	<u> </u>		
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