## L24000061097

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—————(Bu	siness Entity Nar	ne)
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(Do	cument Number)	
Cartifical Cassas	C-216-4-	a of Change
Certified Copies	_ Centicates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Registration Se Division of Cor					
SUBJECT: Courtside T	hreads LLC				
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Brandon C. Cohen				
		Name of Person			
	Courtside Threads LLC				
		Firm/Company			
	154 Lake Monterey Circle				
		Address			
	Boynton Beach, FL. 33426				
		City/State and Zip Code			
	brandoncolby964@gmail.com		<del></del>		
For further information of	n-mail address: (	to be used for future annual report notifi  all:  at ( )	eation)	2024 FAR 11 9 [ 98 5 14 ] 1	( w.m.
Name o	of Person	Area Code Daytime	Telephone Number	T PH	
Enclosed is a check for the	he following amount:		(		الروس)
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional cop	of Status & opy	

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

( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on ou a Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability (Florida document number L24000061097		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)	<del>. –</del> –	
	<del></del>	24 XA
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records	्र हैं।
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Register	ed Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered of being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my di agent as provided for in Chapto ed office address, I hereby con	aties, and I am familiar with and er 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>	Address	Type of Action
Managing	Brandon Cohen	154 Lake Monterey Circle, Boynton Beach, FL, 33426	■Add
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		<del>.</del>	Change
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an effective date is <b>Sote:</b> If the date i		ecific and cannot be p es not meet the app	plicable statutory fil		onal) filing.) Pursuant to 605.0207 ( date will not be listed as t
record specifies a d is filed.	delayed effective date.	but not an effective	re time, at 12:01 a.m	n, on the earlier of: (b	The 90th day after the
Dated		<del></del> `			
Dated	L		<u> </u>		
Oated	Le	ure of a member or a	uthorized representati	ve of a member	

Filing Fee: \$25.00