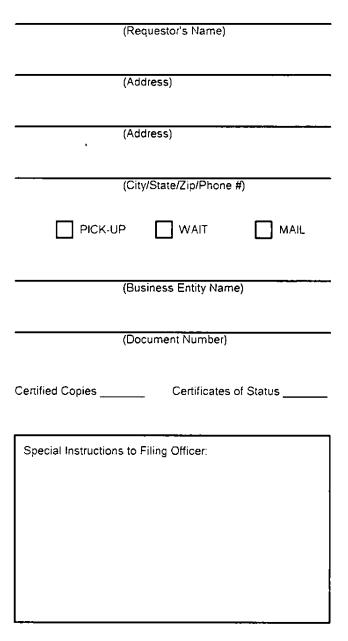
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Office Use Only





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COVER LETTER

TO:

то:	Registration Se Division of Cor			
C119 102	Pursuit Ath	letics, LLC		
SUBJEC	ol:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	indence concerning this matter	to the following:	
		Spencer Anderson		
			Name of Person	
		Pursuit Athletics, LLC		
			Firm/Company	
		14042 Wolcott Dr.		
			Address	
		Tampa, FL 33624		
			City/State and Zip Code	
		heatherandspenceranderson		
		E-mail address: (to be used for future annual report not	ification)
For furth	her information c	oncerning this matter, please c	all:	
Spencer	Anderson		813 293-2270 at ()	
	Name o	f Person		ne Telephone Number
Enclosed	d is a check for th	ne following amount:		
□ \$ 25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		<u>Street Address:</u> Registration Se	ection	
Division of Corporations			Division of Corporations	
	P.O. Box 632 Tallahassee, 1		The Centre of 2415 N. Monro	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pursuit Athletics, 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 February 19, 2024 and assigned 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 , Florida City

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Patrick Melean	3305 Lacewood Rd.	≣ Add
		Tampa, FL 33618	□Remove
			□Change
AMBR	Carla Mclean	3305 Lacewood Rd.	≣ Add
		Tampa, FL 33618	□ Remove
			Change
			Remove
			□Change
		-	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			Change

The four members will o	consist of
Current:	
Spencer Anderson	
Heather Anderson	
Additional:	
Patrick Mclean	
Carla Melean	
	<u> </u>
	<u></u>
Note: If the date inserted in t	n the date of filing:
ne record specifies a delayed ef ord is filed.	fective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
March 7th	. 2024
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00