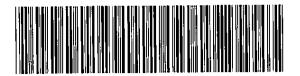
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COVER LETTER

TO:

TO: Registration Se Division of Cor			
	NS LIFESTYLE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Greg H. Britt		
		Name of Person	
	Champions Lifestyle		
		Firm/Company	
	7223 SE 172nd Hazelwoox	11 схэр	
		Address	
	The Villages, FL 32162		
		City/State and Zip Code	
	aj.hubb@hotmail.com		
For further information o	E-mail address: (oncerning this matter, please c	to be used for future annual report notification)	
	oncerning this matter, please c		
Tammy Hubbard		502 648-0988 at ()	
Name o	f Person	Area Code Daytime Telephone N	umber
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Ce	0.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)
Mailing Addres Registration		Street Address: Registration Section	
Division of C	Corporations	Division of Corporations	
P.O. Box 632		The Centre of Tallahassee 2415 N. Monroe Street, St	
Tallahassee, 1	FL 32314	2413 IN. MODIFOU STEEL, St	inc oro

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records. d Liability Company))
The Articles of Organization for this Limited Liability Compa Florida document number <u>L24000180069</u> .	ny were filed on 4/16/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability 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)		24 MAY -2 1 SLOW SAN C
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ee address on our records, <u>enter t</u>	he name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	
	City	Zip Code

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

CHAMPIONS LIFESTYLE LLC

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
MGR	Greg H Britt	7223 SE 172nd Hazelwood Loop	≣ Add
		The Villages, FL 32162	Remove
			Change
			
			Remove
			□Add
			□Remove
			Change
			□Add
			Remove
			☐ Change
		 	
			☐ Change
			□Add
			∏Change

-	
ய effect <u>ote:</u> If	date, if other than the date of filing:
record s is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
nted	January Hubbard Signature of a member or authorized representative of a member
	1 and the land
	January Musical
	Signature of a member or authorized representative of a member