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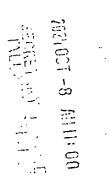
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Elevate Konnect Growth LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Rhonda Grant Boles Name of Person	
Elevate Konnect Growth LLC	
8209 Garden Catalina Circle #2022	
Lake Worth FL 33467 City/State and Zip Code Tho 2K5 Camail. Com E-mail address: (to be)used for future annual report notification)	
For further information concerning this matter, please call:	
Rhame of Person RoleS at (56) 561-389-1353 Area Code Daytime Telephone Number	3
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Mailing Address: Street Address:	

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

	City		Zip Code
		. Florida	
	Enter Fl	orida street address	
New Registered Office Address:			
Name of New Registered Agent:	<u> </u>		3
agent and/or the new registered office address here:			
B. If amending the registered agent and/or registered office a	ddress on our	records, enter the name	of the new registered
		· ·	<u>````</u>
(Mailing address MAY BE A POST OFFICE BOX)			
Enter new mailing address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new principal offices address, if applicable:			
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the	designation "LLC" or the abbi	reviation "L.L.C."
Elevation 360 Sports	LLC		
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company l	nere:	
This amendment is submitted to amend the following:			
Florida document number <u>L2400023951</u> 4			
The Articles of Organization for this Limited Liability Company	were filed on _	2/22/27	and assigned
		E/22/21	
(Name of the Limited Liability Compar (A Florida Limited L	ı <mark>v as it now appe</mark> iability Company)	ars on our records.)	
<u>Elevate</u> kontect	arou		

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
<u>AMBR</u>	Makye Boles	8209 Garden Catalina Cir. Lake Worth FL 33467	# 2022 (D/Add
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ective date, if other than the date of effective date is listed, the date must be spece: If the date inserted in this block document's effective date on the Department.	ific and cannot be s not meet the a	prior to date of fili pplicable statuto	ng or more than 90 o		
cord specifies a delayed effective date, b s filed.	out not an effect	ive time, at 12:0	l a.m. on the earli	er of: (b) The	90th day after th
od September 20					
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