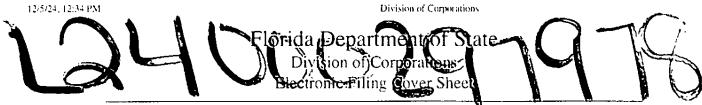
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240004010303)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: EFILE1234@INCFILE.COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALL SPORT ADVISORS LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help



## **COVER LETTER**

ection porations		
RT ADVISORS LLC		
Name of Lin	nited Liability Company	
Amendment and fee(s) are sub	omitted for filing.	
ondence concerning this matter	to the following:	
LOVETTE DOBSON		
	Name of Person	
17350 STATE HWY 249	STE 220	
	Firm/Company	
<del></del>	Address	
HOUSTON, TX 77064		
EFILE1234@INCFILE.CO		
F-mail address: (	to be used for future annual report no	Hication)
oncerning this matter, please c	all:	
	1 888-462-34	353
rt Person	Area Code Dayiii	ne Telephone Number
he following amount:		
□ \$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)
<u>ss:</u> Section	Street Address: Registration Sc	ection
Corporations	Division of Co	prporations
27 FL 32314	· · · · · · · · · · · · · · · · · · ·	Tallahassee oe Street, Suite 810
	Porations  ET ADVISORS LLC  Name of Lin  Amendment and fee(s) are substituted and fee(s) are substitut	Amendment and feets) are submitted for tiling.  Amendment and feets) are submitted for tiling.  Indence concerning this matter to the following:  LOVETTE DOBSON    Name of Person

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALL SPORT A	ADVISORS LLC	
( <u>Name of the Limited Liability Compan</u> (A Florida Limited E	ns as it now appears on our records.)  Lability Company)	<del></del>
The Articles of Organization for this Limited Liability Company vibration of the Liability Company vibration of L24000297978.	were filed on <u>07/02/2024</u>	and assigned
This amendment is submitted to amend the following:		
amendment is submitted to amend the following:  I amending name, enter the new name of the limited liability company here:  ew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L LC."  er new principal offices address, if applicable:  Incipal office address MUST BE A STREET ADDRESS)  er new mailing address, if applicable:  It is image address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address on our records, enter the name of the new registered		
The new name must be distinguishable and contain the words "Limited Liabili	ity 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)		
		20 00
Canada and a self-resultance of a self-resident		747
•		
(Mailing address MAY BE A POST OFFICE BOX)		5
	***************************************	7
B. If amending the registered agent and/or registered office as	ddress on our records, enter the	· · · · · · · · · · · · · · · · · · ·
agent and/or the new registered office address here:	, <del>,</del>	5777 07
Name of New Registered Agent:		
New Registered Office Address		
	, Florida	
	Ciù	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I rovided for in Chapter 605, F.S	am familiar with and . 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
AMBR	Justin Palesotti	836 Brookstone Ct	□Add
		Saint Johns, FL 32259	≕n
			[]Change
			□Add
			□Remove
			Change
		. <u>.</u>	□Add
			□Remove
			∏Add
			□Remove
		<del></del>	☐ Change
			□Add
			□Remove
			☐ Change
		·	□Remove
			□Change

				- · · · · ·
			****	-
·			·	
Effective date, if other than the cran effective date is listed, the date must	late of filing:		(opti	onal) - Glina i Purcusar to 605 020
I an effective date is itsied, the date mass <u>Note:</u> If the date inserted in this blo document's effective date on the De	ck does not meet the app	dicable statutory t	ling requirements, thi	s date will not be listed a
e record specifies a delayed effective	date, but not an effective	e time, at 12:01 a.	m, on the earlier of: (t	o) The 90th day after the
rd is filed.			-	
December 5th	2024			
Dated		·		
	$\mathcal{M}_{\epsilon}$	Athen St	aller	
	1 Ll	ペマツマしほよ しょべつ	live of a member	

Filing Fee: \$25.00

Typed or printed name of signee