L24000354895

(Requestor's Name)
(Address)
(Address)
(City/State/Zıp/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

TO:

Registration Section

Div	ision of Cor	rporations		
CUDICT.	DNA SPO	RTS ACADEMY, LLC		
SUBJECT:		Name of Lin	nited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		DAVINDRA MAHABIR		
			Name of Person	
		DNA SPORTS ACADEM	1Y, LLC	
			Firm/Company	
		980 ALSTON BAY BLV	D	
			Address	
		APOPKA FL,32703		
			City/State and Zip Code	
		INFO@DNASPORTSACA		
			to be used for future annual report no	tification)
For further in	iformation c	oncerning this matter, please c	all:	
DAVINDR/	манавіі	र	305 725-9810 at (
	Name o	f Person		me Telephone Number
Enclosed is a	check for th	ne following amount:		
≘ \$25.00 F	iling Fee	☐ \$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)
	ling Addres		Street Address: Registration So	ection
Div	rision of C	orporations	Division of Co	rporations
	. Box 632		The Centre of	
ı al	lahassee, F	L 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

DNA SPORTS ACADEMY, LLC

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(A) total	ty Company as it now appears on i Limited Liability Company)	our records.)	
	r Entined Thateliny Company)	TALLAHASS	EE. FLORIDA
The Articles of Organization for this Limited Liability C	Company were filed on AUGU	JST 13, 2024	and assigned
lorida document number L24000354895	·		
his amendment is submitted to amend the following:			
If amending name, enter the new name of the limi	ited liability company here:		
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the design	nation "LLC" or the ab	obreviation "L.L.C."
Inter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDR	RESS)		
	.		
Inter new mailing address, if applicable:	-		
Mailing address MAY BE A POST OFFICE BOX)			
 If amending the registered agent and/or registered gent and/or the new registered office address here: 	d office address on our recor	ds, <u>enter the nam</u>	e of the new registe
Name of New Registered Agent:			
Name of New Registered Agent.			
New Registered Office Address:	Enter Florida s	treet address	
New Registered Office Address:	Enter Florida s		
New Registered Office Address:	Enter Florida s City		Zip Code
New Registered Office Address:	City		

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
MRG	DAVINDRA MAHABIR	980 ALSTON BAY BLVD	
		APOPKA, FL, 32703	
		<u> </u>	
MGR	DOEMATTIE BALDEO	980 ALSTON BAY BLVD	= Add
		APOPKA. FL. 32703	□ Remove
			□Change
			□Remove
			□Change
<u></u>			□Add
			□Remove
			□Change
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			□Change
		-	□Add
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Effective date,						(optic			
f an effective date Note: If the date	e inserted in thi	is block does no	ot meet the ap	pplicable statut					
document's effec	ctive date on th	e Department o	of State's reco	ords.					
	s a delayed effe	ective date, but	not an effecti	ve time, at 12:	01 a.m. on the	earlier of: (b)) The 90	0th day a	fter the
			000	1					
d is filed.	ember	12	<u>202</u> 1	<u> </u>					
e record specifies od is filed. Dated <u>Septe</u>	embur	Man	de l	0,-	sentative of a me				