Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN N.E.S.V. I, LLC

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

From: Ranae McGraw

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears of	on the records of the Florida Departme	nt of
State: NESV I, LLC		
Enter new principal office 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)		FILES
2. The Florida document number of this limited liab	oility company is: M03000001215	Þ'
Jurisdiction of its organization: DE		
4. Date authorized to do business in Florida: 04/17/	/2003	
SECTION II (5-9 complete only the applicable cl		
5. New name of the limited liability company: Fen (must)	iway Sports Group, LLC contain "Limited Liability Company, "	"L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C.	aging members adopting the alternate r	in Florida and attach a name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ade	d officer address on our records, <u>enter t</u> dress here:	he name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street	Address
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper of and accept the obligations of my position as registe document is being filed to merely reflect a change is liability company has been notified in writing of this	it and agree to act in this capacity. I fur and complete performance of my duties wed agent as provided for in Chapter 6 in the registered office address, I hereb	i, and Lam familiar with 105, F.S. Or. if this

If the amendment changes person, title or capacity in accordance with 605.0902(1)(e), indicate that change:				
le/ Capacity	<u>Name</u>	Address	Type of Action	
			□Add	
			□Remo	
			DAdd	
			□Remo	
	<u> </u>		\ \ \ \ \ \ _	
			□Remo	
			□Add	
			□Add	
aforementioned ar	ficate, if required; no more than 90 da nendment(s), duly authenticated by the the law of which this entity is organized.	e official having custody of reco	☐Remo	

Filing Fee: \$25.00

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'N.E.S.V. I, LLC',

FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO 'FENWAY

SPORTS GROUP, LLC' ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2021,

AT 12:18 O'CLOCK P.M.

2021 AUG I I AM 9: 18



Authentication: 203870329

Date: 08-09-21

2946300 8320 SR# 20212920115