M06000003297

1	(Requestor's Name)
	(Address)
	,
	(Address)
	(
	(City/State/Zip/Phone #)
	(Orty/Otale)Zip/Filone #)
PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer
Special instructions	s to 1 ming Officer.

Office Use Only



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2022 JUL 28 AM II: 09 2

of 7/29/2022

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

07/28/2022

D	ate:	07/28/2022	a: DW
		Acc#I20160000072	a: Cook
Name:	True Club M	Management, LLC	<u> </u>
Document #:			
Order #:	14462348		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing:	Certified: Plain: COGS:		
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount:	\$ 55.00	

Thank you!

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

SECTION 1 (1-4 must be completed)

2022 JUL 28 /// 8: 37

1. Name	of limited liability Company as it appear	r <mark>s on</mark> the records of	the Florida Depa	artment of
State:	TROON CLUB MANAGEMENT, LLC			
Enter nev	v principal office address, if applicable:		_	-
	il office address E A STREET ADDRESS)			
(Mailing	v mailing address, if applicable: <u>address</u> <u>A POST OFFICE BOX</u>)			
2. The Fl	orida document number of this limited lia	ability company is:	-	
 Jurisd Date a 	iction of its organization: Delaware uthorized to do business in Florida: 06/0	9/2006		
	N II (5-9 complete only the applicable			
5. New n	ame of the limited liability company: <u>To</u> (mus	rue Club Management. it contain "Limited	LLC Liability Compa	ny, " "L.L.C.," or "LLC.")
conviot tl	inavailable, enter alternate name adopted ne written consent of the managers or ma ain "Limited Liability Company," "L.L.G	naging members ac	transacting busing the altern	ness in Florida and attach a atte name. The alternate name
6. If amei registerec	nding the registered agent and/or registere agent and/or the new registered office a	ed officer address o ddress here:	n our records, <u>en</u>	ter the name of the new
Name of	New Registered Agent:		. <u>-</u>	<u></u>
New Reg	istered Office Address:			
			Enter Florida Str	reet Address
			1	Florida Zip Code
		City		Zip Code
I hereby of the provisiond and accepted accument	istered Agent's Signature, if changing Researce the appointment as registered agentions of all statutes relative to the proper of the obligations of my position as regist is being filed to merely reflect a change company has been notified in writing of the	nt and agree to act and complete perfo ered agent as prov in the registered oj	ormance of my di ided for in Chapt	ities, and I am familiar with er 605, F.S. Or, if this

8. If the amendment	changes person, title or capacity in a	ecordance with 605.0902 (1)(e), indi	cate that chang
Title/ Capacity	<u>Name</u>	<u>Address</u>	<u>Tvpe</u>
			
			
			
aforementioned a	ificate, if required: no more than 90 (mendment(s), duly authenticated by the law of which this entity is organ	the official having custody of record	

Filing Fee: \$25.00

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF AMENDMENT OF "TROON CLUB MANAGEMENT,

LLC", CHANGING ITS NAME FROM "TROON CLUB MANAGEMENT, LLC" TO

"TRUE CLUB MANAGEMENT, LLC", FILED IN THIS OFFICE ON THE

TWENTY-FIFTH DAY OF JULY, A.D. 2022, AT 7 O'CLOCK P.M.



Authentication: 204006351

Date: 07-26-22

State of Delaware
Secretary of State
Division of Corporations
Delivered 07:00 PM 07/25/2022
FILED 07:00 PM 07/25/2022
SR 20223080418 - File Number 4170709

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

Name of Limited	d Liability Company: 🖺	ROON	CLUB	ANAM	GEMENT,	L
The Certificate of	of Formation of the limi	ted liabil	lity cor	npany	is hereby	am
as follows:						
CHANGE ENTI'	TY NAME: TRUE CL	UB MAN	IAGEM	ENT,	LLC	
l						
	WHEREOF, the undersi		ve exec	cuted th	nis Certific	cate
	VHEREOF, the undersi		ve exec	euted th	nis Certifio A.D. 202	cate
			ve exec	cuted th	nis Certific A.D. 202	eate
			ve exec	euted th	nis Certific A.D. 202	cate
			<u></u>		A.D. 202	cate
			<u></u>		A.D. 202	eate
	day of JULYBy:		Auth	orized	A.D. 202 Person(s)	cate

Page 1



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

DELAWARE, DO HEREBY CERTIFY "TRUE CLUB MANAGEMENT, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF JULY, A.D. 2022.

Authentication: 204006352

Date: 07-26-22