M1300000 4203

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

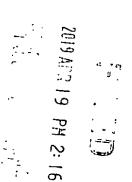
Office Use Only



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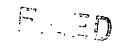


COVER LETTER

TO: Registration S Division of Co			
CUDIECT.	Sure Sports	Lendins, LLC	
SUBJECT:	Name of Lim	Lending, LLC ited Liability Company	. - ,-
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Alan Wi	Mot Name of Person	<u> </u>
	Heither	Legal, P.L.L.C	, <u>.</u>
		Firm/Company	
	215 Hendri	US ISE Address	
		Address	
	Fot Laude	erdale, FL 33301 City/State and Zip Code	
		City/State and Zip Code	
	E-mail address: (1	6 Neither legal wom to be used for future annual report notion	(fication)
For further information	concerning this matter, please ca		
Alan W	ilmot	ar 581 / 821-0	1570
	of Person	at (281) 851-9 Area Code Daytime	e Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
5 23.00 Fining Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	LING ADDRESS:	STREET/COURI	
	tration Section ion of Corporations	Registration Section Division of Corpor	
P.O. I	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Ce	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Sur St	20r+S	Len	ding,	LLC	2019	PAPR 19 PM 2: 16
(Name of the Limite	ed Liability ((A Flonda Li	Company united Liab	as it now app olity Compan	ears on our rec	runds:)	
The Articles of Organization for this Limited Li.	ability Con	mpany we				and assigned
This amendment is submitted to amend the following	wing:					
A. If amending name, enter the new name of	the limite	<u>ed liabilit</u>	y company	here:		
Sure Sports	s, LL					
The new name must be distinguishable and contain the w	ords "Limite	d Liability	Company," tl	ne designation "	LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applica	able:	-				···
(Principal office address MUST BE A STREE	T ADDRE	<u>:SS)</u>				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	-				
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	or registe	ered officess here:	Enter	on our reco		the name of the new
			City			Zip Code
ar and the second of the secon	Dagietanad	4 monts				

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 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>	<u>Address</u>	Type of Action
			Add
		Remove	
			Change
		□ Remove	
		□ Change	
			☐ Remove
			Change
		Add	
			☐ Remove
		☐ Change	
		Add	
		□ Remove	
		□ Change	
		☐ Remove	
		Change	

· i ujucii	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·
	
(If an effect <u>Note:</u> If	date, if other than the date of filing: (optional) (ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) (the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the is effective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: Oth day after the record is filed.
Dated	
	Al
	Signature of a member or authorized representative of a member
	Alan Willynot (Authorized Reprosentative Leiunger) Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00