

M190000 10715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

1st Copies \_\_\_\_\_

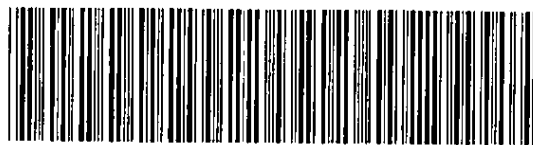
Certificates of Status \_\_\_\_\_

of Instructions to Filing Officer.

J. HORNE

MAY - 5 2023

Office Use Only



400408031534

FILED  
2023 MAY -4 AM 11:01  
SECRETARY OF  
TALLAHASSEE

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2023 MAY -4 AM 11:34  
SECRETARY OF  
TALLAHASSEE

**CT CORP**  
**(850)656-4724**  
**3458 Lakeshore Drive,**  
**Tallahassee, FL 32312**

**Date:** 05/04/2023  
Acc#120160000072

*Eric Dill*

Name:	3 STEP SPORTS LLC
Document #:	
Order #:	14915091

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

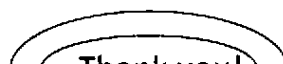
Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 55.00
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SECRETARY  
TALLAHASSEE

2023 MAY -4 AM 10:55

FILED

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

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: 3 STEP SPORTS LLC

Enter new principal office address, if applicable: 300 BRICKSTONE SQUARE

(Principal office address  
MUST BE A STREET ADDRESS)

ANDOVER, MA 01810

Enter new mailing address, if applicable:

(Mailing address  
MAY BE A POST OFFICE BOX)

300 BRICKSTONE SQUARE

ANDOVER, MA 01810

2. The Florida document number of this limited liability company is: M19000010715

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 11/05/2019

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: \_\_\_\_\_  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida Street Address

\_\_\_\_\_, Florida

City

Zip Code

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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Adding Tania King as 3 STEP SPORTS LLC CEO and removing David Geaslen

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Tania King	300 Brickstone Square	<input checked="" type="checkbox"/> Add
		Andover, MA 01810	<input type="checkbox"/> Remove
Manager	David Geaslen	200 Ballardvale St. Bld 2, Flr 3	<input type="checkbox"/> Add
		Wilmington, MA 01887	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the  
aforementioned amendment(s), duly authenticated by the official having custody of records in the  
jurisdiction under the law of which this entity is organized.

  
Signature of the authorized representative

Deanna Sheridan

Typed or printed name of signee

Filing Fee: \$25.00