

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ARENA AZTEC SHAFFER, LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
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September 24, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

ARENA AZTEC SHAFFER, LLC 601 WEST 6TH STREET HOUSTON, TX 77007

t

SUBJECT: ARENA AZTEC SHAFFER, LLC REF: M21000006888

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please give the title for Jimmy Parks.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L LemieuxFAX Aud. #: E24000324014Regulatory Specialist IILetter Number: 124A00021465

P.O BOX 6327 - Tailahassec, Florida 32314

H24000324014

ELED 2024 SEP 23 PH 2: 54

Docusign Envelope ID: 78876ACC-C8EB-4648-86FE-C6529F325DD8

COVER LETTER

TO: **Registration Section Division of Corporations**

Arena Aztec Shaffer, LLC SUBJECT:

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jimmy Parks

Name of Person

Arena Aztec Shaffer, LLC

Firm/Company

10861 S Howell Ave.

Address

Oak Creek / Winscosin 53154

City/State and Zip Code

legal@arenagroup.com

...

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tamer Nassar	at(⁸³²) ²⁰²⁻⁹⁸⁸⁷
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
,	Tallahassee, FL 32303
Enclosed is a check for the follo	

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Enclosed is a check for the tono ang amount.				
□\$25 Filing Fee	🗆 \$30 Filing Fee &	🗆 \$55 Filing Fee &	🗆 \$60 Filing Fee,	
	Certificate of Status	Certified Copy	Certificate of Status &	
			Certified Copy	

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

H24000324014

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: _____

Enter new principal office address, if applicable:			
(Principal office address	10861 S Howell Ave., Oak Creek WI 53154		
MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			20
(<u>Mailing address</u> MAY BE A POST OFFICE B <u>OX</u>)			2024 S
		-+ -	μ̈́
2. The Elogida dominant number of this limited lie	hility company is. M21000006888		23
2. The Florida document number of this limited liability company is: M21000006888			PH
3. Jurisdiction of its organization:			N:
4. Date authorized to do business in Florida: $\frac{06/07}{100}$	7/2021		55

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

5. New name of the limited liability company: Arena Shaffer, LLC

(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 _____ 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Docusign Envelope ID: 78B76ACC-C8EB-4648-B6FE-C6529F325DD8

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

H24000324014

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

Title/ Capacity	Name	Address	Type of Action
<u>VP, S, T</u>	Jaclyn Berg	10861 S Howell Ave., Oak Creek WI 5315	54 □Add
			ERcmove
Auth. Rep	Jimmy Parks	10861 S Howell Ave., Oak Creek WI 5315	Add
		······	□Remove
		<u> </u>	Add 202
			CRemove
. <u> </u>			🗆 Add
9. Attach e d is a	certificate, if required: no more than 9	0 days old, evidencing the	🗆 Remove
aforemention	ed amendment(s), duly authenticated b inder the law of which this entity is org	y the official having custody of records in the	
		f the authorized representative	
	Jimmy Parks		
	Typed or pri	inted name of signee	

Filing Fee: \$25.00

H24000324014



Page 1

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 "ARENA AZTEC SHAFFER, LLC", CHANGING ITS NAME FROM "ARENA AZTEC SHAFFER, LLC" TO "ARENA SHAFFER, LLC", FILED IN THIS OFFICE ON THE TWENTIETH DAY OF SEPTEMBER, A.D. 2024, AT 4:19 O'CLOCK P.M.



5836996 8100 SR# 20243747570

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204459044 Date: 09-23-24 Docusign Envelope ID: 76876ACC-C8EB-4548-B6FE-C8529F325DD8

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

- 1. Name of Limited Liability Company: Arena Aztec Shaffer, LLC
- The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the LLC:is Arena Shaffer, LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 19th day of September , A.D. 2024

By:

erally of the

Jonuny Parles

Authorized Person(s)

Name: Jimmy Parks

Print or Type