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2016 SEP 12 P 2: 27

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## **COVER LETTER**

Division of Corpo			
SUBJECT: Purebr	ed Motorspor	79 CLC	
SUBJECT:		ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Bernhard P	Name of Person	
	Purebred 1	Motorsports LLC. Firm/Company	
	8982 Country	Saugre drive	
	Largo, FL, 3	S777 City/State and Zip Code	
	Contect@ Purel E-mail address: (	bred motor SPOTTS - Com to be used for future annual report notifica	ation)
For further information con	ncerning this matter, please ca	all:	2016
Bernhard R	othmann	at (727) 580-184	16 48 9
Name of	Person	Area Code Daytime T	Celephone Number 3
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Registra Division P.O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Krebred Motorsports	LLC
(Name of the Limited Liability Cor (A Florida Limit	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compa	any were filed on Tity 2, 2015 and assigned
Florida document number <u>LI 5000114168</u>	****
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	iability company here:
BROKE BOTCH CUST	OMS LLC
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6565 44th St N
(Principal office address MUST BE A STREET ADDRESS)	DENELLAS DARY FL. 33781
Enter new mailing address, if applicable:	9015 LESSOR LN N
(Mailing address MAY BE A POST OFFICE BOX)	LAR60, FL, 33773
<u> </u>	
	office address on our records, enter the name of the new
registered agent and/or the new registered office address b	nere:
$\mathcal{P}_{\alpha'}$	Miner B 3
Name of New Registered Agent:	F 1 cm Pc 1 AM 22 TI
New Registered Office Address: 90	3 LEISOKE LN EV E
٠	Enter Florida street address
<u> </u>	760, Florida 33773
N. B. J. M. M. G. J. M. J. B.	City in Code
New Registered Agent's Signature, if changing Registered Age	<b>∞</b>
I hereby accept the appointment as registered agent and a	agree to act in this capacity. I further agree to comply with the

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>	Address	Type of Action
<u>AMBR</u>	Bornhard Rothmann		
		8982 Country Square Drive	Remove
2 >>>		Largo, FL, 33777	Change
<u>AMBB</u>	Robert Miller	9015/EBSURELNN	<b>W</b> Add
		LARAO, FL, 33773	□ Remove
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Filing Fee: \$25.00