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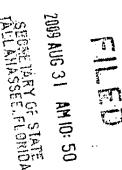
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T. CLINE

SEP - 1 2009

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	ELIZABI	ETH MURPHY		
SUBJECT:	Name of Limi	ted Liability Company	'	
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	condence concerning this matter	to the following:		
		LIZABETH MURPHY		
	•	Name of Person		
		Firm/Company		2000
		9030 SR 46		2009 AUG 31 AM ID: 50 SECRETARY OF STATE
		Address		JG 31 AM
		MIMS, FL 32754		
		City/State and Zip Code		
	E-mail address: (i	INGFM@YAHOO.COM to be used for future annual report notifica	ntion)	तुल o
For further information	concerning this matter, please of	all:		
ELIZ/	ABETH MURPHY	41 /	49-3056	
Name	of Person	Area Code & Daytime	Felephone Number	
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)	Certified	e of Status &
MAILING ADDRESS: Registration Section		STREET/COURIE Registration Section		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLASSIC I	<u>EMBROIDERY, LL</u>	<u>C</u>		
(Name of the Limited Liability (A Florida L	Company as it now appear imited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Conference L05000108944	ompany were filed on	11/09/2005	and assign	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ted liability company her	<u>e</u> :		
G & M MC	TORSPORTS, LLC			
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Compa	ny," the designation	2109 146	reviation
Enter new principal offices address, if applicable:				1
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>		强国 3) podpinion
		·····	- M	
			55.0	
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			,T5-7	···-
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		our records, <u>enter</u>	the name of t	the new
Name of New Registered Agent:				
New Registered Office Address:	Eni	ter Florida street ad	ddress	
		, 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 608, 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member **Type of Action** <u>Address</u> Title Name 1 ☐ Add Remove Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **AUGUST 28TH** 2009 Dated Signature of a member or futhorized representative of a member **ELIZABETH MURPHY** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00