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T. HAMPTON

JAN **2 9** 2010

EXAMINER

COVER LETTER

то:	Registration Section Division of Corpo				
SUBJ	ECT:	R&BM	otorsports, LLC.		
			ited Liability Company		
The er	nclosed Articles of Ar	mendment and fee(s) are sub	omitted for filing.		
Please	return all correspond	ence concerning this matter	to the following:		
			Kimball K. Ross		
			Name of Person		
			Kimball K. Ross, Esq.		
			Firm/Company		
		1 Oceans West Blvd. # 8B3			
	Address				
		Daytona	Beach Shores, Florida	32118	
			City/State and Zip Code		
		rrobers E-mail address: (1	con@qualitybrandsinc.c	com Inotification)	
For fu	rther information con-	cerning this matter, please c	all:		
	Kimba	all K. Ross	at (_386_)	566-1902	
	Name of Po	erson	Area Code & D	aytime Telephone Number	_
Enclos	sed is a check for the	following amount:			
\$25	5.00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc		Status &
	MAILIN	G ADDRESS:	STREET/CO	DURIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327 Registration Section
Division of Corporations
Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L (A F	& B Motors Liability Compar Torida Limited L	sports, LLC. ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Lia Florida document number		were filed onFebruary 6, 2009	_ and assign	ned
This amendment is submitted to amend the follow	ving;			
A. If amending name, <u>enter the new name of (</u>	he limited liab	ility company here:		
	& R Motors	·		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Company," the designation "LLC	or the abb	reviation
Enter new principal offices address, if applica	ble:	105 Inlet Harbor Rd.		
(Principal office address MUST BE A STREET	ADDRESS)	Ponce Inlet, Florida 32127		<u>≥</u> s
Enter new mailing address, if applicable:		105 Inlet Harbor Rd.) JAN 28	ECRETARY SION OF C
•	(AV)	Ponce Inlet, Florida 32127	7	- 354E
(Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/or	r registered of	ffice address on our records, enter the	name of	ORATIONS new
registered agent and/or the new registered off	<u>ice address her</u>	<u>:e</u> :		
Name of New Registered Agent:	N/A			
New Registered Office Address:		Enter Florida street addres	TS.	
		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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

GR = Ma GRM = N	nager Aanaging Member		
<u>tle</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Remove
15			Add
			Remove
			— ~
			Remove
			Damous
		nter change(s) here: (Attach additional shee	is, if necessary.)
<u>IN</u>	ONE		
_			IO JAN
			N 28
_			AN 11:32
ted	January 27		:32
	Soli	ter	
	Signature	of a member or authorized representative of a me	mber
		Robert C. Roberson Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00