L10000100564

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DEPARTMENT OF STATE
DIVISION OF CORPORATION

A. PARISHANI NOV 0 5 2023

COVER LETTER

TO: Registration Section
Division of Corporations

Motes	orsport Network LLC	
SUBJECT:	Name of Limited Liability Company	2023 OF PA DEPA JIVISIO TALL
The enclosed Artic	cles of Amendment and fee(s) are submitted for filing.	DEPARTMENT SIGNAL CANASSE
Please return all co	orrespondence concerning this matter to the following:	AH 9: RPORAT E. FLORE
	Jason Potter	ATC ATC
	Name of Person	_ '
	Motorsport Network	
	Firm/Company	_
	5972 NE 4th Avenue	
	Address	_
	Miam, FL, 33137	
	City/State and Zip Code	-
	jason.potter@motorsport.com E-mail address: (to be used for future annual report notification)	
For further inform	ation concerning this matter, please call:	
Jason Potter	786 493 7240	
ì	Name of Person Area Code Daytime Telephone Number	 r
Enclosed is a chec	k for the following amount:	
☑ \$25.00 Filing	(additional copy is enclosed) Certified	ite of Status &

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DEPARIMENT OF STATE ONVISION OF CORPORATION ON ON THE ORIGINAL ORI	2023 OCT	7
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Motorsport Network LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on $\underline{^{09/27/2010}}$ and assigned Florida document number L10000100564 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Driven Lifestyle Group LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office 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 City

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 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
			□Add
			□Remove
			□Change
			□ Add
			DETARINE DAMASS
			A DRIPOR STIVIC
			☐ Remove
			□Add
			□Remove
		-	□Change
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(If an el Note:	date, if other than the date of filing: October 27, 2023 (ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day he date inserted in this block does not meet the applicable statutory filing requirement is effective date on the Department of State's records.			
the reco	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier	of: (b) The 90th o	lay after	the
Dated	Nova Pate			

Filing Fee: \$25.00