

11/29/2013 00:17

#5239 001/005

L11000050435

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VELOCE MOTORCAR INTERNATIONAL, LLC**

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JAN 21 2014

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11/29/2031 00:17
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1/17/2014 8:38:10 AM PAGE 1/001 Fax Server

#5233 P.002/005



January 17, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VELOCE MOTORCAR INTERNATIONAL, LLC
3041 W. MCNAB ROAD
POMPANO BEACH, FL 33069US

SUBJECT: VELOCE MOTORCAR INTERNATIONAL, LLC
REF: L11000050435

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.

The effective date must be specific and cannot be prior to the date of filing.

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.

Tammi Cline
Regulatory Specialist II

FAX Aud. #: H14000012458
Letter Number: 614A00001179

RECEIVED
14 JAN 17 PM 12:35
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TALLAHASSEE, FLORIDA

2014 JAN 17 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

11/29/2031 00:18

#5233 P.003/005
From: VELOCE MOTORCAR INTL

2014 JAN 17 10:45 (GMT)

H14000012458

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

VELOCE MOTORCAR INTERNATIONAL 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 04/28/2011 and assigned
Florida document number L11000050435

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal office 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:

IVAN ANGULO

New Registered Office Address:

3041 W MCNAB ROAD

Enter Florida street address

POMPANO BEACH

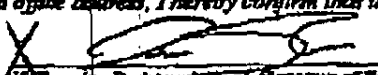
Florida 33069

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 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.

X 
If Changing Registered Agent, Signature of New Registered Agent

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2 added

Jan 14 2014 3:08PM EHS 3052624736

page

Jan 16 2014 11:16AM EHS 3052624736

H14000012458

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

MGR - Manager

AMBR - Authorized Member

Title	Name	Address	Type of Action
MGRM	GREGG L RICCA	7579 ESTRELLA CIRCLE	☐ Add
		BOCA RATON	☒ Remove
		FL, 33433	
			☐ Add
			☐ Remove
			☐ Add
			☒ Remove
			☐ Add
			☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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11/29/2031 00:18

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D. If sending any other information, enter change(s) here: *(attach additional sheets, if necessary)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filing and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JANUARY 14 2014



Signature of a member or authorized representative of a member

IVAN ANGULO

Typed or printed name of signer

STATE OF FLORIDA
DEPARTMENT OF STATE
TALLAHASSEE, FL 32399

2014 JAN 17 AM 8:10

FILED

Page 3 of 3

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