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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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2022 JUN 17 AM 8: 30

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

STERLING RACIN	G, LLC			
				A model of City
				Art of Inc. File LTD Partnership File
				·
				Foreign Corp. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
		i	<u> </u>	Art. of Amend. File
				RA Resignation
				Dissolution / Withdrawal
			√	Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
			 -	Fictitious Search
Signature				Ficitious Owner Search
				Vehicle Search
				Driving Record
Requested by: BA	06/16/22			UCC 1 or 3 File UCC 11 Search
Name	Date	Time		UCC 11 Searcn
Walk In	Will Pick Up			
Walk-In Thomas & 64 84	-			Courier

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	STERLIN	G RACING, LLC		
30141		Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		JONATHAN D. BELOFF	, ESQ.	
			Name of Person	
		BELOFF LAW, P.A.		
			Firm/Company	- <u> </u>
		1691 MICHIGAN AVE.,	SUITE 210	
			Address	
		MIAMI BEACH, FL 3313	39	
			City/State and Zip Code	**************************************
		JDB@BELOFFLAW.COM		
		E-mail address: (to be used for future annual report notifi	cation)
For fur	ther information c	oncerning this matter, please c	all:	
JONA	THAN D. BELOF		305 673-1101	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
□ \$2 :	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 JUN 17 AM 8: 30

STERLING RACING, 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 06/03/2011 Florida document number L11000065688	and assigned
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 contain the words "Limited Liability Company," the designation "LLC" or the abbrev	ation "L.IC."
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)	
Mading address MAT BE A POST OFFICE BOAT	
B. If amending the registered agent and/or registered office address on our records, <u>enter the registered agent and/or the new registered office address here</u> :	name of the nev
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	

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.

City

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>	Name	Address	Type of Action
MGRM	SAM HERZBERG	927 LINCOLN ROAD STE 214	D Add
		MIAMI BEACH, FL 33139	■ Remove
			Change
MGR	SAM HERZBERG	927 LINCOLN ROAD STE 214	B Add
		MIAMI BEACH, FL 33139	□ Remove
			Change
			D Add
			☐ Remove
			☐ Change
			Peinove
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			□ Add
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ffective date, if other than the an effective date is listed, the date mustote: If the date inserted in this bloocument's effective date on the December 2.	ock does not meet the applica	o date of filing or more than 90 ble statutory filing required	(optional) days after filing.) Pursuant to 605,0207 nents, this date will not be listed as
e record specifies a delayed The 90th day after the reco	i effective date, but not ord is filed.	an effective time, at	12:01 a.m. on the earlier of
pated	. 2022	d .	
		rized representative of a mem	