

L12000075458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

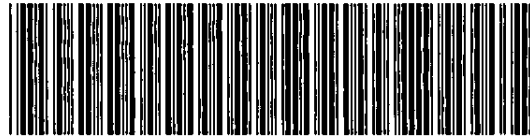
(Business Entity Name)

(Document Number)

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2013 JUL 15 PM 4:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

JUL 16 2013

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **EXTREME POWERSPORTS UNLIMITED LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**CARRIE MAHR**

Name of Person

**EXTREME POWERSPORTS UNLIMITED LLC.**

Firm/Company

**2253 VISTA PARKWAY SUITE 13**

Address

**WEST PALM BEACH FL 33411**

City/State and Zip Code

**APBROMBERG@AOL.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**CARRIE MAHR**

Name of Person

at ( **561** ) **248-1995**

Area Code & Daytime Telephone 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)

☐ \$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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**EXTREME POWERSPORTS UNLIMITED 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 06/06/2012 and assigned  
Florida document number L12000075458

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 offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

2253 VISTA PARKWAY SUITE 13

WEST PALM BEACH, FL. 33411

(561) 899-3454 OFFICE

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2253 VISTA PARKWAY SUITE 13

WEST PALM BEACH, FL. 33411

(561) 899-3454 OFFICE

**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:

CARRIE MAHR

New Registered Office Address:

2253 VISTA PARKWAY SUITE 13

*Enter Florida street address*

WEST PALM BEACH

, Florida 33411

*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.*

  
Carrie Mahr  
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:

MGR = Manager

MGRM = Managing Member

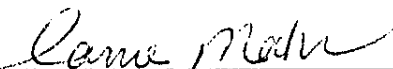
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	BARRETT, NATHAN	7849 NILE RIVER RD.	<input type="checkbox"/> Add
		WEST PALM BEACH, FL. 33411	<input checked="" type="checkbox"/> Remove
MGRM	MAHR-MINOR, ELISHA JOSEY	1233 W. FERNLEA DR.	<input checked="" type="checkbox"/> Add
		WEST PALM BEACH, FL. 33417	<input type="checkbox"/> Remove
MGRM	KIP, ARI LARRISA	1233 W. FERNLEA DR.	<input checked="" type="checkbox"/> Add
		WEST PALM BEACH, FL. 33417	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated JUNE 14, 2013



Signature of a member or authorized representative of a member

CARRIE MAHR

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 3, 2013

CARRIE MAHR  
EXTREME POWERSPORTS UNLIMITED LLC  
2253 VISTA PARKWAY, SUITE 13  
WEST PALM BEACH, FL 33411

SUBJECT: EXTREME POWERSPORTS UNLIMITED LLC  
Ref. Number: L12000075458

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TALLAHASSEE, FLORIDA

FILED

We have received your document for EXTREME POWERSPORTS UNLIMITED LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 413A00016525