L12000080046

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000242300050

12/06/12--01015--016 **25.00

SECRETARY OF STATE

AND FILED EC-6 AMII: 57

D. BRUCE
DEC 07 2012
EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

Motorcycles Under 250cc, 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:

Steve Gordon

Name of Person

Motorcycles Under 250cc, LLC

Firm/Company

301 Fluvia Ave SE

Address

Palm Bay, Florida 32909

City/State and Zip Code

mcu250cc@yahoo.com

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

For further information concerning this matter, please call:

Steve Gordon

_,321、626-0842

Name of Person

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

12 匠 -6 相川:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Motorcycles Under 250cc, LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our record Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Compar	ny were filed on 06/18/2012	and assigned
Florida document number L12000080046		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and end with the words "Lir"L.L.C."	mited Liability Company," the designa	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		12 SE
(Principal office address MUST BE A STREET ADDRESS)		
		- (2) + P ₂
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		0 5 7 0 5 7
		<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet address
	, Flor	ida Zip Code
	City	Lip 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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Steve Gordon	301 Fluvia Ave SE	Add
		Palm Bay, Florida 32909	Remove
MGR	Linda Gordon	301 Fluvia Ave SE	Add
		Palm Bay, Florida 32909	P Remove

			Remove
			12 DEC -6 SM II: 57 SECTATION FILED
·	Activity (Contractive Contractive Contract		Add Remove
			Add
			Remove

. If amen	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_{ited} De	ecember 12 , 2012
	Il Sol
	Signature of a member or authorized representative of a member
	Steve Gordon
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECULIARY OF SIME

APPKOVEU AND FILED