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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	#)
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COVER LETTER

TO: Registration Sec Division of Corp			
GRAND PE			
SUBJECT:		ited Liability Company	.
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	ANDRII KAPLUNOV		
		Name of Person	
	GRAND PRIX LLC		
		Firm/Company	
	3550 SWAN LN		
		Address	
	PENSACOLA FL 32504		
		City/State and Zip Code	
	GRANDPRIXLLC@GMA	IL.COM to be used for future annual report not	ification)
For further information co	oncerning this matter, please ca	-	inication)
ANDRII KAPLUNOV		850 221-3535	
Name o	f Person	at () Area Code Daytir	nc Telephone Number
Enclosed is a check for the	ne 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)
Registr Divisio P.O. B	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Section Division of Corportion Building 2661 Executive Control Tallahassee, FL 3	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRAND PRIX LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited L Florida document number L12000086290	iability Company	were filed on <u>07/02/2012</u>	and assigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	pility company here:		
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.IC."	
Enter new principal offices address, if applic	rable:	3550 SWAN LN		
Principal office address MUST BE A STREET ADDRESS)		PENSACOLA FL 32504		
			<u>. </u>	
Enter new mailing address, if applicable:		3550 SWAN LN		
Mailing address MAY BE A POST OFFICE BOX)		PENSACOLA, FL 32504		
B. If amending the registered agent and registered agent and/or the new registered o			enter the name of the no	
Name of New Registered Agent:	ANDRII KAP	LUNOV		
New Registered Office Address:	3550 SWAN I	N.		
11011 110gilliona Office Humbol.		Enter Florida street address		
	PENSACOLA	T31 - 1	32504	

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 Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	<u>Address</u>	Ī	ype of Action
AMBR	ALEXANDROV, ARCADIE	5545 HOMEWOOD RD		_□ ∧dd
		PENSACOLA, FL 32504		_■ Remove
				_□ Change
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Filing Fee: \$25.00