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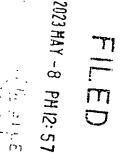
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5/18/23 V-44



COVER LETTER

F 2 8

TO: Registration Section

Divis	sion of Corpo	orations		
SHRIPOT.	Mario	N HORSES TRA	II HING CENTER, L	_LC
SOBJECT: _		Name of Lim	ited Liability Company	
The enclosed	Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return a	all correspond	lence concerning this matter	to the following:	
		CHARLES A	ROA Name of Person	
		Marion Ho	Pirm/Company	Certer, LLC
		6749 SW	64th CT Address	
		Ocala, F	City/State and Zip Code	
		E-mail address; (to be used for future annual report	notification)
For further in	formation con	cerning this matter, please c	all:	
CHAR	LES A	Roa	at (<u>954</u>) <u>802 Area Code</u> Da	2.5248
	Name of P	erson	Area Code Da	ytime Telephone Number
Enclosed is a	check for the	following amount:		
E ¥\$25,00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg	ing Address:		Street Address Registration	Section
	ision of Co . Box 6327	rporations		Corporations of Tallahassee
Tall	ahassee, FL	. 32314	2415 N. Mo	nroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

Division of Co			
Marion Ho	rses Training Center LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Charles A Roa		
		Name of Person	
	Marion Horses Training C	enter LLC	
		Firm/Company	
	6749 SW 64th Ct		
		Address	
	Ocala, FL 34476		
		City/State and Zip Code	
	mhtc-trucks@outlook.com	to be used for future annual report notificat	ion
For further information of	concerning this matter, please c	·	,
Charles S Roa		954 802-5248 at ()	
Name o	of Person	Area Code Daytime Te	lephone Number
Enclosed is a check for t	he 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	Section	Street Address: Registration Section	
Division of C	Corporations	Division of Corpor	ations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marion Horses Training Center, LI	.C	
(Name of the Limi	ted Liability Company as it now appe- (A Florida Limited Liability Company)	ars on our records.)
e Articles of Organization for this Limited L	iability Company were filed on $\frac{0}{2}$	9/04/2012 and assigned
orida document number L12000113346	·	
s amendment is submitted to amend the following	lowing:	
If amending name, enter the new name of	of the limited liability company	here:
ITC Enterprises, LLC		
new name must be distinguishable and contain the	words "Limited Liability Company," the	s designation "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if appli	cable:	2023 HA
incipal office address MUST BE A STRE		- A T
incipal office analess mest be worked		-
		SS 7
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE	<u></u>	
		·
		and antouthe name of the new rate
If amending the registered agent and/or ent and/or the new registered office addr	registered office address on our	r records, enter the name of the new res
ent and/or the new registered office addr	ess nere.	
Name of New Registered Agent:	Charles A Roa	
	6749 SW 64h CT	
New Registered Office Address:		Florida street address
	Ocala	, Florida <u>34476</u>
		0'101131121

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

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>	Type of Action
			Add
			□Remove
			□Remove
			∐Remove
			Change
			Remove
			Change
			∐Remove
			Change

### *** *** *** *** *** *** *** *** ***		ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: 10	-	
### Dated May 7 **Signburf of a member or authorized representative of a member May 7		
### Dated May 7 **Signburf of a member or authorized representative of a member May 7	_	
Effective date, if other than the date of filing: 05/07/2023 (Optional) It an effective date, if other than the date of filing: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated May 7 2023 Signstarts of a member or authorized representative of a member		
Effective date, if other than the date of filing: O5/07/202.3 (Optional) If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (In Mote) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated May 7 2023 Signbarrie of a member or authorized representative of a member		
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Signature of a member or authorized representative of a member	[3	May 7 2023
	Date	
		Signsture of a member or authorized representative of a member
Charles A Roa		Charles A. Rog