

L12 000152754

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pure Powersports Plus 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:

Lillian Mignano  
Name of Person

Firm/Company

3080 N. Washington Blvd. #24  
Address

Sarasota, FL 34234  
City/State and Zip Code

Purepower941@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Mignano  
Name of Person

at (941) 879-1222  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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

Pure Powersports Plus 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 12/06/2012 and assigned Florida document number L12000152754.

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)

3080 N. Washington Blvd.  
Suite 24  
Sarasota, FL 34234

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3080 N. Washington Blvd.  
Suite 24  
Sarasota, FL 34234

**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:

Lillian Mignano

New Registered Office Address:

3080 N. Washington Blvd. Suite 24  
Enter Florida street address

Sarasota, Florida 34234  
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.

Lillian Mignano  
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>
MGR.	MICHELE P. MIGNANO	3080 N. WASHINGTON BLVD	<input type="checkbox"/> Add
		SUITE 24	<input checked="" type="checkbox"/> Remove
		SARASOTA, FL 34234	
MGR.	LILLIAN MIGNANO	3080 N. WASHINGTON BLVD	<input checked="" type="checkbox"/> Add
		SUITE 24	<input type="checkbox"/> Remove
		SARASOTA, FL 34234	
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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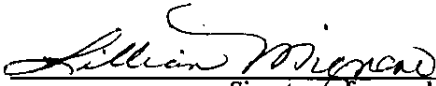
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Dated JANUARY 15, 2014.



Signature of a member or authorized representative of a member

LILLIAN MIGNANO

Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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