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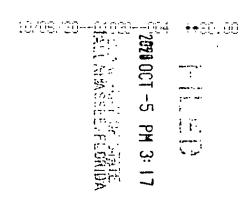
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

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COVER LETTER

TO:

Registration Section

Division of C	Corporations		
NASCA	RTS LLC	•	
SUBJECT:	Name of Limited L	iability Company	
The enclosed Articles	of Amendment and fee(s) are submitte	d for filing.	
Please return all corre	spondence concerning this matter to the	e following:	
	Mark Wilson		
		Name of Person	
	NASCARTS LLC		7879
	·· <u>·</u>	Firm/Company	300
	10940 US 1 North, B		2829 OCT -5
		Address	P 11
	Ponte Vedra, FL 32081		PM 3: 17
	Cit	ry/State and Zip Code	
	ewilson@nascarts.com		
	E-mail address: (to be	used for future annual report notif	ication)
For further information	on concerning this matter, please call:		
Mark Wilson		904 429-7861 at ()	
Nan	ne of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status SINC San ("Y TH (CH)")	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	on Section of Corporations	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NASCARTS LLC					
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on c Liability Company)	our recor <u>ds.</u>)		
The Articles of Organization for this Limited Lia	ability Company	were filed on ()4/24/20	014	and as	signed
lorida document number L14000066538	·				
his amendment is submitted to amend the follo	wing:				
a. If amending name, enter the new name of	the limited liab	ility company here:			
o change					
he new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company," the designa	ation "LLC" or the	abbreviation "L	.L.C."
inter new principal offices address, if applica	ible:	no change			
Principal office address MUST BE A STREET	(ADDRESS)	no change	. <u>. </u>	782	
		no change		00	
				00T-5	,,
Enter new mailing address, if applicable:		no change			<u> </u>
Mailing address MAY BE A POST OFFICE I	<u>30X)</u>	no change	***	PH	
		no change		3: 17 CRIDA	
				DÃ DÃ	
3. If amending the registered agent and/or re		address on our recor	ds, <u>enter the na</u>	me of the ne	w registe
gent and/or the new registered office addres	s here:				
Name of New Registered Agent:	no change				
New Registered Office Address:	no change				
THE WINGSTON CHICA TRIANCES.		Enter Florida st	reet address	<u> </u>	
	no change		, Florida [‡]	no change	
		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 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>	Address	Type of Action
AMBR	Bradley R. Ernst	10940 US 1 North, B, Ponte Vedra, FL 32081	= Add
			Remove
			□Change
			□Add
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fective date, if other than	the date of fili	8/18/2020 ng:	_		optional)		
m effective date is listed, the date ofte: If the date inserted in this	must be specific a	nd cannot be prio	r to date of filing or	more than 90 days	after filing.)	Pursuant to 60 zill not be li:	05,0207 sted as
cument's effective date on the	e Department of	f State's records		ing requirement	tine date :		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ecord specifies a delayed effe	ctive date, but n	ot an effective t	ime, at 12:01 a.r	n, on the earlier o	of: (b) The	90th day af	ter the
is filed.							
October 1		2020					
ated General	<u></u>	_:	·				
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Filing Fee: \$25.00