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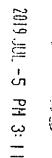
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C. GOLDEN JUL 1 7 2019

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	AZZURRI	MOTORSPORTS, LLC.		
•		Name of Lin	nited Liability Company	
The enclosed	Articles of a	Amendment and fee(s) are sul	omitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		ROLANDO BLANCO		
			Name of Person	
			Firm/Company	
		2454 Braman Ave unit #	16/17	
			Address	
		Fort Myers, FL 33901		
		moeveti@aol.com	City/State and Zip Code	
		E-mail address; (to be used for future annual report notifi	cation)
For further in	formation co	ncerning this matter, please ca	all:	
Mohamed Ell		<u> </u>	239 471 6605 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	following amount:		·
□ \$25.00 Fil	ling 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)

MAHING ADDRESS:

TO:

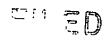
Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahussee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Azzurri Motorsports, LLC.			2019 JUL - 5 PM 3: 1
(Name of the Limi	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
e Articles of Organization for this Limited L		05/01/2014	and assigned
orida document number 1.14000071089	,		
is amendment is submitted to amend the fol	lowing:		
If amending name, enter the new name of	of the limited liability company h	<u>ere</u> :	
ne new name must be distinguishable and contain the	words "Limited Liability Company," the o	lesignation "LLC" (or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:		
Principal office address MUST BE A STREA	<u>ET ADDRESS)</u>		···
nter new mailing address, if applicable:			
<u> Iailing address MAY BE A POST OFFICE</u>	(BOX)		
. If amending the registered agent and egistered agent and/or the new registered of		our records.	enter the name of the
gistered agent and/or the new registered to	mice address nerv.		
Name of New Registered Agent:	Mohamed Elbadawy		
New Registered Office Address:	2455 Moreno Ave		<u> </u>
	Enter Flo	rida street address	
	Fort Myers	, Flor	ida <u>33901</u>
	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>	<u>Address</u>	Type of Action
MGRM	ROLANDO BLANCO	2460 45TH AVENE NAPLES, FL 34120	■ Add
			□ Remove
			☐ Change
		<u></u>	
			Remove
			☐ Change
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Effective date, if other t	han the date of fil	JUNE 26TH :	2019	(optional)	
f an effective date is listed, the Note: If the date inserted document's effective date	date must be specific in this block does no	and cannot be prior to of meet the applicab	date of filing or more ble statutory filing re	han 90 days after filing.) P	ursuant to 605,0207 Il not be listed as
e record specifies a c The 90th day after	delayed effective the record is file	e date, but not ed.	an effective tim	≘, at 12:01 a.m. or	the earlier of
JUNE 26TH Dated		2019			
	1/1/1		- '		
	110006		zed representative of a		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00