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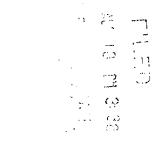
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AUG 11 2015 S. YOUNG

Magnum Race LLC

3080 Fairlanc Farms, Suite 2 Wellington, FL 33414 Phone: (561) 846-1948 E-Mail: thomasupchuich@ginail.com

6 August 2015

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sirs:

Please find enclosed our amendments to our Articles of Organization of Magnum Race LLC.

We wish to change our registered address to 3080 Fairlane Farms Road, Suite 2, Wellington, FL 33414 and we wish to add Thomas Upchurch as both our Registered Agent and a Manager.

If you have any questions, please don't hesitate to contact me at (561) 846-1245 or Thomas Upchurch at the details listed in the letterhead.

Sincerely,

Julia Kelk Owner

COVER LETTER

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MAILING ADDRESS:

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAG1UM (Name of the Limited	Liability Company	as it now appears on our resility Company)	ecords.)	
(A	Florida Limited Liab	oility Company)		
The Articles of Organization for this Limited Liab	oility Company we	ere filed on	./2014	and assigned
Florida document number				
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liabilit	y company here:		
The new name must be distinguishable and contain the wor	ds "Limited Liability	Company," the designation	"LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicab	ole:	3080 FAIRLAND	FARMS ROA	D
(Principal office address MUST BE A STREET	ADDRESS)	SUITE 2		
	_	WELLINGTON ,	FL 33414	
			•• ,	آ لَدُ
Enter new mailing address, if applicable:	_	2135 WINASOU	K WAY	
(Mailing address MAY BE A POST OFFICE BO	<u>OX)</u>	WELLINGTON,	FL 33414	
	_			· · · · · · · · · · · · · · · · · · ·
				. (3
B. If amending the registered agent and/or		e address on our rec	ords, <u>enter the</u>	
registered agent and/or the new registered office	<u>ce address here</u> :			<u>, , , , , , , , , , , , , , , , , , , </u>
Name of New Registered Agent:	THOMAS	upetturch		
New Registered Office Address:	3080 FAIRL	ANE FARHS ROAD Enter Florida street a	Soite 2	
	WELLINGT	.01	, Florida 33	414
		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, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	THOMAS UPCHURCH	2135 WINDSOCK WAY, WELLINGTON FL	 Add
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Page 3 of 3

Filing Fee: \$25.00