15000006344

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PART 121 PH 3:57

COVER LETTER

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•	YTREME	MOTORS LEG	•	w *
SUBJECT:				•
	•	Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ondence concerning this matter	to the following:	
		MANIRAM JAGMOHAN	I	
			Name of Person	
		XTREME MOTORS LLC		
			Firm/Company	
۶		8403 RAMBLING RIVER	DRIVE	
			Address	· · · · · · · · · · · · · · · · · · ·
		SANDFORD, FL 32771		
			City/State and Zip Code	
		xtrememotorstt@gmail.com		
		E-mail address: (to be used for future annual report n	otification)
For further i	information c	oncerning this matter, please ca	all:	
BONNIE BORNACELLI Name of Person		786 6527272 at ()		
			ime Telephone Number	
Enclosed is	a check for th	ne 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)
	ailing Addres		Street Address:	
Registration Section			Registration S	
		orporations	Division of C	
P.0	O. Box 632	.7	The Centre of	i allahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

FILED

XTREME MOTORS LLC			7827 T'W 27 PH 3: 57
(Name of the Lim	ited Liability Compa	ny as it now appears on our reco Liability Company)	rds.)
			THE STATE
The Articles of Organization for this Limited I	Liability Company	were filed on 01/12/2015	and assigned
Florida document number L15000006344	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LI	C" or the abbreviation "L.L.C."
Enteranew principal offices address, if applicable:		N/A	
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
B. If amending the registered agent and/or agent and/or the new registered office addressed Name of New Registered Agent:	~	address on our records, <u>ente</u>	r the name of the new register
Name of New Registered Agent.	N//	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	N/A	Enter Florida street addr	****
		Enier r ioriaa sireel aaar	Eas
		, F	Florida
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

XTREME MOTORS LLC

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 amending Authorized Person(s) authorized to manage, enter the tiue, name, and address of each person being aud or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	MANIRAM JAGMOHAN	8403 RAMBLING RIVER DRIVE	= Add
		SANDFORD, FL 32771	□Remove
			Change
ę			□Remove
			Change
			□Add
			□Remove
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fective date, if other than the an effective date is listed, the date must	date of filing:st be specific and cannot be prior to date of f	(optio	filing.) Pur	suant to	605.0
ote: If the date inserted in this biocument's effective date on the D	ock does not meet the applicable statut epartment of State's records.	tory ming requirements, this	date will	not be	nstea
record specifies a delayed effectiv is filed.	e date, but not an effective time, at 12:	:01 a.m. on the earlier of: (b)	The 90	th day :	after t
	2023				
ated					
ated JUNE 26TH Akmo ky	Signature of a member or authorized repre				_