

L15000063057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900274275759

900274275759
07/20/15--01021--013 **30.00

FILED
15 JUL 29 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 30 2015

J SHIVERS

Law Office of
Jamie B Greusel, Esq.
Attorney at Law
1104 North Collier Boulevard
Marco Island, FL 34145

Telephone: 239-394-8111 Fax: (239) 394-0549 E-mail: jbg@jbglaw.net

Jamie B Greusel
Licensed in Florida and New Jersey

July 15, 2015

State of Florida
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

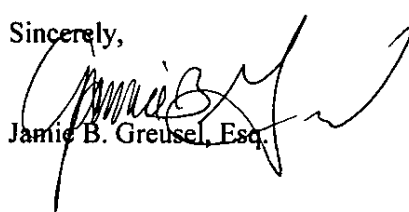
Re: Gulfshore Motorsports, LLC

Gentlemen/Ladies:

Enclosed please find the Articles of Amendment to Articles of Organization for the above referenced along with our check in the amount of \$30.00 for the filing fee and a Certificate of Status.

Kindly file the original and return the Certificate of Status to our office. I have included a self-addressed stamped envelope.

Sincerely,


Jamie B. Greusel, Esq.

JBG/vh
Enclosure

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

Gulfshore Motorsports, 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 4/10/2015 and assigned Florida document number L15000063057.

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Jamie B Greusel

New Registered Office Address:

1104 N. Collier Blvd.

Enter Florida street address

Marco Island

, Florida

City

15 JUL 29 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Type of Action</u>
<u>MGR</u>	<u>James Mayer</u>	<u>9284 Menaggio Ct., #201</u>	<input type="checkbox"/> Add
		<u>Naples, FL 34114</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>AMBR</u>	<u>James Mayer</u>	<u>9284 Menaggio Ct., #201</u>	<input checked="" type="checkbox"/> Add
		<u>Naples, FL 34114</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRETARY
ALFABASSI
15 JUL 29

SECRETARY OF STATE
ALABAMA
15 JUL 29 AM 10:41

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 1-16-13

Kenneth T. Mateja
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Kenneth Mateja

Typed or printed name of signee