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COVER LETTER

TO:

Registration Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

14 - 15 - 15 - 15 - 15 - 15 - 15 - 15 -			
SUBJECT: DIY	Motorsports		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing	
Ploaco roturn all corrocne	ondence concerning this matter	to the following:	
rease return an correspo	mocnee concerning into maner	in the Killianing.	
	Matthew Palr	n	
	Iviatinew r air	Name of Person	
		Firm/Company	
		, .	
	12409 Victarra PL		
		Address	
	Trinity FL 34655		\ · ·
		City/State and Zip Code	
	Matthew1.palm@	gmail.com	
	E-mail address: (to be used for future annual report notif	ication) يُونِي ا
For further information c	oncerning this matter, please co	all;	ication)
Matthew Palm		847 \ 912-610	
	t Person	at (_847)	: Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25,00 Filing Fee	☐ \$30,00 Filing Fee &	☐ \$55,00 Filing Fee &	¥ \$60,00 Filing Fee.
	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
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	ING ADDRESS: ration Section	STREET/COURT Registration Section	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2019

MATTHEW PALM 12409 VICTARRA PL TRINITY, FL 34655

SUBJECT: DIY MOTORSPORTS, LLC

Ref. Number: L15000066982

We have received your document for DIY MOTORSPORTS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "L.C." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 819A00023653

5018 DEC - 6 BH 15: 02

CELLEDEL

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIY Motorsports, LLC (Name of the Limited Liability Company as it now appears on our records,)
(A Florida Limited Liability Company) 04/16/2015 The Articles of Organization for this Limited Liability Company were filed on Florida document number L15000066982 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: C Alfa, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 12409 Victarra PL Enter new principal offices address, if applicable: Trinity FL 34655 (Principal office address MUST BE A STREET ADDRESS) 12409 Victarra PL Enter new mailing address, if applicable: Trinity FL 34655 (Mailing address MAY BE A POST OFFICE BON) 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: New Registered Office Address: Enter Florida street address

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.

CHY

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
MGR	Nolan Ryon	27952 Cedar View Ct	W Add
		Mechanicsville MD 20659	Remove
			Change
			Add
			Remove
			Change
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<u>ote:</u> If the	ive date is listed, the date must be specific and cannot be prior to the date inserted in this block does not meet the applical t's effective date on the Department of State's records.	(optional) be date of filing or more than 90 days after filing.) Pursuant to 605,0207 ble statutory filing requirements, this date will not be listed as
	rd specifies a delayed effective date, but not Oth day after the record is filed.	an effective time, at 12:01 a.m. on the earlier of
ated	December 2 2019	_ •
		1
	Signature of a member of author	<u> </u>

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00