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(Re	equestor's Name)	
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PICK-UP	(Address) (Address) (City/State/Zip/Phone #) P	
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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November 3, 2015

BRIAN WARD 1350 SHEELER AVE APOPKA, FL 32703 US

SUBJECT: BATTERYPOWERSPORTS LLC

Ref. Number: L15000165411

We have received your document for BATTERYPOWERSPORTS LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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) 245-6051.

Letter Number: 515A00023267

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Registration Se Division of Cor		•	
cup is	Battery Pow	ver Sports LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Brian Ward		
			Name of Person	
		Battery Power Sports		
			Firm/Company	
		1350 Sheeler Ave		
			Address	
		Apopka FI 32703		
			City/State and Zip Code	
		BatteryPowerSports@gmail		
		E-mail address: (to be used for future annual report notific	cation)
For furt	her information c	oncerning this matter, please ca	ail:	
Brian V	Vard		407 860-0640 at ()	
	Name o	f Person		Telephone Number
Enclose	d is a check for the	ne following amount:		
5 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)

MAILING ADDRESS:

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

batterypowersports LEC				
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on our reco Liability Company)	ords.)	
The Articles of Organization for this Limited I Florida document number 9/29/2015	and as	ssigned		
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name</u>	of the limited liab	oility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "l	L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		1350 Sheeler Ave		
		Apopka fl 32703		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1350 Sheeler Ave	15 NOV	
		Apopka Fl 32703	ASSWE ANTANA	er samen er samen er samen er
B. If amending the registered agent and registered agent and/or the new registered of			E PH	of the ne
Name of New Registered Agent:	Brian Ward			
New Registered Office Address:	1350 Sheeler a	<u></u>		
		Enter Florida street add	ress	
	Apopka		Florida 32703	
		City	Zip Code	e

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
mgr	Jerry Smalley	3019 Cecelia dr	
		Apopka Fl 32703	Remove
ambr/mgr	Brian Ward	1350 Sheeler ave	■ Add
		Apopka fl 32703	□ Remove
			☐ Change
			Add
			□ Remove
			——————————————————————————————————————
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			Add
			☐ Remove
			Change

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record speci	fies a delayed	d effective (date, but n	ot an effecti	ve time, at 1	2:01 a.m	. on th	e earlie	er (
The 90th day	after the rec	ord is filed.							
, 10/30/2015									
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Filing Fee: \$25.00