# L1500167189

l

(D_		
(Ke	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP		MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	<u> </u>
(		
Certified Copies	_ Certificates of	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	,
	•	



11/07/17--01034--028 \*\*25.00

17 MOV - 7 AM 8:49

NOV 0 9 2017

Y SULKER

# **COVER LETTER**

#### TQ: **Registration Section Division of Corporations**

MOTORSPORT GROUP, LLC

•

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KATIE SHENKO

Name of Person

MOTORSPORT NETWORK

Firm/Company

5972 NE 4TH AVENUE

Address

MIAMI, FL 33137

Ci	ity/State and Zip C	Tode	
KSHENKO@MOTORSPORT.	СОМ		17
E-mail address: (to be	used for future ar	nual report notification)	
For further information concerning this matter, please call:			- 7
KATIE SHENKO	954 at (	504-0123	1997 1977
Name of Person	Area Code	Daytime Telephone Number	<u>, </u> , , , , , , , , , , , , , , , , , ,
			51

Enclosed is a check for the 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)

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

MOTORSPORT GROUP LLC	ited Liability Compa	any as it now appears on on	r records )	
( <u></u>	(A Florida Limited	any as it now appears on ou Liability Company)	<u>r records.</u> )	
The Articles of Organization for this Limited I Florida document number <u>1.15000167189</u>	Liability Company	were filed on <u>10/01/201</u>	5	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name (</u>	of the limited liab	<u>ility company here</u> :		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	on "LLC" or the al	bbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	5972 NE 4TH AVENU	JE	
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	MIAMI, FL 33137		
			<b>_</b> .	
Enter new mailing address, if applicable:		5972 NE 4TH AVENU	iΕ	
(Mailing address MAY BE A POST OFFICE BOX)		MIAME, FL 33137		1
				0
B. If amending the registered agent and	l/or registered of	ffice address on our i	records, <u>enter</u>	
registered agent and/or the new registered o	nince aduress ner	<u>e</u> :		j cç
Name of New Registered Agent:	Motorsp	ort Network	,LLC	64:
New Registered Office Address:	5972 NE 4TH .	AVENUE		
	<u> </u>	Enter Florida stree	et address	
	MIAMI		, Florida	137
		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.

Loi

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

# MGR = Manager AMBR = Authorized Member

.

<u>Title</u>	Name	Address	<b>Type of Action</b>
MGR	MIKE ZOI	5972 NE 4TH AVENUE	🗆 Add
		MIAMI, FL 33137	C Remove
			🗖 Change
	·····		Add
			Remove
			Change
			🖸 Add
			Remove
			Change
			Remove
			Change
			Add
			Remove
			Change
			O Add
			Remove
			Change

• • D: If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

 - <u> </u>
· · · -
(optional)

(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.) Pursuan (665.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 OCTOBER 12

2017

Katie Shenko

Signature of a member or authorized representative of a member

KATIE SHENKO

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00