115000203269

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
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. COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	SILCARBO	ON RACING TEAM LLC		
		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		ANTONIO REGOJO		
		-	Name of Person	
		REGOJO LAW, PA		
			Firm/Company	
		3550 BISCAYNE BLVD S	STE 507	
			Address	
		MIAMI, FL 33137		
			City/State and Zip Code	
		AREGOJO@REGOJOLAV	V.COM to be used for future annual report noti	floation
For further in	nformation co	oncerning this matter, please ca		neation)
ANTONIO I		meering this matter, prease et	305 814-8299	
	Name of	Derson	at ()	e Telephone Number
	Name of	i cison	Area Code Daytiii	e reteptione realities
Enclosed is a	check for th	e following amount:		
\$25.00 F	iling 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:

TO:

Registration Section

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**

SILCARBON RACING TEAM LLC

(Name of the Limited Lia (A Flo	inity Company as it now appears on our records.) orida Limited Liability Company)		
The Articles of Organization for this Limited Liabilit Florida document number L15000203269	y Company were filed on 12/07/2015	and ass	igned
This amendment is submitted to amend the following	g:		
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 t	he abbreviation "L.	L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DDRESS)		
		Per s	
Enter new mailing address, if applicable:		19. P	79
(Mailing address MAY BE A POST OFFICE BOX)	2	<u>ें</u> स	-
		75. 7	<u>. 1</u> ;
			- 1
B. If amending the registered agent and/or registered agent and/or the new registered office a		iter the name	of the new
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Audiess.	Enter Florida street address		
	, Florid:	à	
	City	Zip Code	
New Registered Agent's Signature, if changing Regist	ered Agent:		
I hereby accept the appointment as registered age provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	d complete performance of my duties, and I d d agent as provided for in Chapter 605, F.S. tered office address, I hereby confirm that th	am familiar wit Or, if this doca	th and iment is

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>	Name	Address	Type of Action
MGR	ANIBAL GARCIA	2889 MCFARLANE RD #1202	■ Add
		MIAMI, FL 33133	☐ Remove
			Change
			Add
			□ Remove
			Change
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cument's effective date on the De	partment of State's records	3.		
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AUGUST 5TH	2016	·		
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