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| PICK-UP | ☐ WAIT | MAIL | | |
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| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: Elite Motors LC. |
| 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: |
| Pearl Johnson |
| Name of Person |
| Elite Motors LLC. |
| Firm/Company |
| 315 Paint Street Ste 5 |
| Address |
| Kockledge, FL 32955 |
| City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Pearl Johnson at 340, 642-0106 |
| Name of Person Area Code Daytime Telephone Number |
| |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee &\Bigcup \$55.00 Filing Fee &\Bigcup \$60.00 Filing Fee, Certificate of Status &\Certified Copy &\Certificate of Status &\Certified Copy &\Certified C |

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

| Elite Motors | LLC. | | | |
|---|---|---|----------------------------------|---------|
| (Name of the Limited (A | Liability Company as it now as Florida Limited Liability Compa | pears on our records.) | | |
| The Articles of Organization for this Limited Liab | ility Company were filed or 417 | , March 4, 20 | and assig | ned |
| This amendment is submitted to amend the follow | ing: | | | |
| A. If amending name, enter the new name of t | ne limited liability compar | ıv here: | | |
| The new name must be distinguishable and contain the wor | ds "Limited Liability Company," | the designation "LLC" or the | abbreviation "L.L. | C." |
| Enter new principal offices address, if applicat | le: | | | |
| (Principal office address MUST BE A STREET | ADDRESS) | | 50 15 35 15 15 35 15 15 35 | |
| Enter new mailing address, if applicable: | | | FOF STA | |
| (Mailing address MAY BE A POST OFFICE B | <u></u> | | ROA 2 | |
| B. If amending the registered agent and/or registered agent and/or the new registered officers. | • | s on our records, <u>ente</u> | r the name of | the new |
| Name of New Registered Agent: | Pearl John. | | | |
| New Registered Office Address: | 315 Paint S | Street Ste. | 5 | <u></u> |
| | Ruckledge | Frorida sireei dauress Florida, Florida _ | 32955 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 **Title Address Type of Action** <u>Name</u> 4031 Brantley Circle Rockledge, FL 32955 Otis Johnson □ Add ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change _□ Add □ Remove ☐ Change □ Add ☐ Remove Change Remove _ Change

| | nding any other information, enter change(s) here: (Attach additional sheets, | · |
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| ote: | ve date, if other than the date of filing: Tuly 11, 2016 ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 da If the date inserted in this block does not meet the applicable statutory filing requirement | nts, this date will not be listed as |
| cum | ent's effective date on the Department of State's records. | |
| | cord specifies a delayed effective date, but not an effective time, at 12 90th day after the record is filed. | 2:01 a.m. on the earlier o |
| | 7-19-16 | |
| ated | | |
| | Alke the | |
| | Signature of a member or authorized representative of a member | المُنْ المُن |
| | Pearl & Johnson | 1000 |
| | T1 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | Typed or printed name of signee | SA 2 |
| | Typed or printed name of signee | 25 |
| | Page 3 of 3 | |