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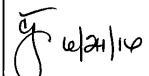
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## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Horsepower Mafia Motors ports Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Josh Janosky Name of Person	
Horsepower Mafia Motorsports Firm/Company	
10622 103 <sup>rd</sup> 57 -1	
Address	
Jackson ville FL 32210  City/State and Zip Code  72 Camaro family at Gmail Dot Net	
72 Camaro family at Gmail Dot Net	
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	
Tosh Janosky at (90H) 233-8206  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)	
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	



FILED

16 JUN 23 PH 2: 45

APRILAD SERVICE.

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 7, 2016

JOSHUA M. JANOSKY 10622 103RD STREET NUM - 1 JACKSONVILLE, FL 32210

SUBJECT: HORSEPOWER MAFIA MOTORSPORTS L.L.C.

Ref. Number: W16000041438

We have received your document for HORSEPOWER MAFIA MOTORSPORTS L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The complete document was not received.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 316A00011998



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	1 Total Norman State
Harsenauer Mafic W	otorsports L.L.C. 16 JUN 23 PM 2: 45 Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the	ne Limited Liability Company is:
Principal Office Address:	Mailing Address:
Jacksonville, Fl 32210	Jacksonwille, FI 32210
ARTICLE III - Registered Agent, Registered Office, & Regist	tered Agent's Signature:

FILED

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

**ARTICLE I - Name:** 

Joshua Janosky

Name

10672-10312 ST Num-1

Florida street address (P.O. Box NOT acceptable)

Jacksonville Fl 3220

City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<mark>`itle:</mark> AMBR" = Authorized Mem	Name and Address:
MGR" = Manager	Josh Janosky
FVI (\$ 1\	5237 - Soginaw Ave
	Jackson Ville FL 3
•	
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Page 2 of 2