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COVER LETTER

TO:	Registration S Division of Co			
SUBJE		PORTGAMING.COM, LLC		
SUDJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please re	etum all corresp	ondence concerning this matter	to the following:	
		KATIE SHENKO		
			Name of Person	
		MOTORSPORT NETWO	RK	
			Firm/Company	
		5972 NE 4TH AVENUE		
			Address	
		MIAMI, FL 33137		
			City/State and Zip Code	
		KSHENKO@MOTORSPO		
		E-mail address: (to be used for future annual report notif	ication)
For furtl	ier information (concerning this matter, please ca	all;	
KATIE	SHENKO		954 504-0123	
	Name (of Person	at ()	Telephone Number
Enclosed	d is a check for t	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

MOTORSPORTGAMING.COM,	LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited)	iny as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited L	iability Company	were filed on $\frac{07}{2}$	/28/2016	and assigned
Florida document number L16000142205				
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company he	re:	
		_	_	当二二
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the d	esignation "LLC" or the abb	reviation " .C."
Enter new principal offices address, if applic	cable:	5972 NE 4TH A	VENUE	
(Principal office address MUST BE A STREET ADDRESS)		MIAML FL 331	37	- T.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5972 NE 4TH A	VENUE	<u> </u>
		MIAML FL 331	37	_
		<u>-</u>		
n re a a a a a a				
B. If amending the registered agent and registered agent and/or the new registered o	/or_registered_of ffice address her	lfice address on e:	our records, enter t	<u>he name of the new</u>
		_		
Name of New Registered Agent:	Motor	sport.	Network,	LLC
New Registered Office Address:	5972 NE 4TH /	•	·	
		Enter Flor	ida street address	
	MIAMI		Florida <u>331</u>	37
		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.

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	<u>Name</u>	Address	Type of Action
MGR	MIKE ZOI	5972 NE 4TH AVENUE	□ Add
		MIAMI, FL 33137	□ Remove
			
			Remove
			Change
			Add TO THE OFFICE OF THE OFFI
			Change P
			Change P Add
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ffective date, if other than the	late of filing:	(optional)
Sote: If the date inscrted in this blo	be specific and cannot be prior to date of filing or more ck does not meet the applicable statutory filing	re than 90 days after filing.) Pursuant to 605.0207 (3)6 requirements, this date will not be listed as the
ocument's effective date on the De	partment of State's records.	
a record execition a delayed	offective data but as a effective bire	
The 90th day after the reco	effective date, but not an effective tir rd is filed.	me, at 12:01 a.m. on the earlier or:
CATEGORIES 12		
OCTOBER 12	2017	
ated	·	
rated OCTOBER 12		
rateu	Katis Shenko Signature of a member or authorized representative o	of a member

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Filing Fee: \$25.00