

L17000067503

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2017 AUG -7 PM 4:31
CLERK OF STATE
TALLAHASSEE, FLORIDA

K. SALY
AUG - 8 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMS RACING PRODUCTS, LLC

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:

Augusto Santiago, Case Manager/Paralegal

Name of Person

LAW OFFICE OF GRANT KAPLAN

Firm/Company

7100 W. Camino Real, Suite 100

Address

Boca Raton, FL 33433

City/State and Zip Code

amsracingsa@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Augusto Santiago

561 347-8337
at ()

Name of Person

Area Code

Daytime Telephone Number

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

FILED
2017 AUG -7 PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMS RACING PRODUCTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on March 24, 2017 and assigned
Florida document number L17000067503.

This amendment is submitted to amend the following:

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 the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

320 Thor Ave., Unit 1

Palm Bay, FL 32908

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Stephan Willemse

New Registered Office Address:

320 Thor Ave., Unit 1

Enter Florida street address

Palm Bay

Florida 32908

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	American Motorsport CC	1498 Zeiss RD	<input checked="" type="checkbox"/> Add
		Lazerpark, Johannesburg 2040	<input type="checkbox"/> Remove
		SOUTH AFRICA	<input type="checkbox"/> Change
AMBR	WILLEMSE, Stephan	320 Thor Ave., Unit 1	<input checked="" type="checkbox"/> Add
		Palm Bay, FL 32909	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	WILLIAMSE, Stephan	2681 Palm Bay Rd. NE, Unit 3	<input type="checkbox"/> Add
		Palm Bay, FL 32905	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	DE BEER, Michele	2681 Palm Bay Rd. NE, Unit 3	<input type="checkbox"/> Add
		Palm Bay, FL 32905	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 TALLAHASSEE, FL 32303
 CLERK OF DISTRICT COURT
 1ST JUDICIAL CIRCUIT
 JAMES H. HARRIS, JR., CLERK

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

FILED
2011 AUG -7 PM 4:32
U.S. DEPT. OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D.C. 20535

E. Effective date, if other than the date of filing: _____ (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.) Pursuant to 605.0207 (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.

(b) The 90th day after the record is filed.

Dated July 31, 2017

Signature of a member or authorized representative of a member

Stephan Willemse, AMBR

Typed or printed name of signee