47000015173

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LAYIER MOTOR SPORTS 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:	2017 BEC 14 A
TEFF DUYAL Name of Person	新山。
LAVIER MOTOR SPORTS UC	
GOII RODMAN ST SUITE 104	
HOLLYWOOD, FL. 33023 City/State and Zip Code HEAVYONWHEELS DGMAIL. COM /E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TEFF DUVAL at (954) 865-5329 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
tadditional copy is enclosed) Certified C	of Status &

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**

LAVIER MOTOR S	PORTS UC
(Name of the Limited Liability Compa	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 4700075173	11/02/07/5
This amendment is submitted to amend the following:	pility company here:
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6011 RODMAN ST # 104 HOLLY WOOD, FL. 33023
(Principal office address MUST BE A STREET ADDRESS)	HOUY WOOD, FC. 33023
Enter new mailing address, if applicable:	SAME
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, enter the name of the new e:
Name of New Registered Agent: JEFI	= DUYAL-
New Registered Office Address: 60//	ROBMAN ST #104
Holle	1W00D .Florida 33033 Zin 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 = Au	thorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	JEFF DUVAL	- 6011 RODMAN ST # 104 HOLLYWOOD, A. 3302	<u>~_</u> 8 √Add ∟ ≾
			Remove
			Change
AMBR	EVELYN J. FLORE	FT. LAUDERDALE, FL	1 1 0 Add 33314
			Remove
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effective d te: If the	ate is listed, the d fate inserted in	an the date of fili ate must be specific a this block does not the Department of	nd cannot be prior to meet the applicab	date of filing or more that the statutory filing requ	(optiona in 90 days after fili irements, this da	nei) Pursuant to 605 0
record s he 90th	pecifies a de day after th	elayed effective e record is filed	date, but not : i.	an effective time,	at 12:01 a.m	1. on the earlier
ed		1-17				
			1. 1.4.	ved representative of a m		
_		Signature of	a member or authori	and correct annuity of a m		

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Filing Fee: \$25.00