117000118668

Office Use Only



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D. BRUCE AUG 1 4 2021

COVER LETTER

	egistration Sec Lision of Corp					
SHD III C	Superior Street Golf Carts					`.
SUBJECT		Name of Lim	ited Liability Company			
The ancho	d Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please (c)	all correspon	dence concerning this matter	to the following:			
		Operations & Compliance				
			Name of Person			
		Superior Street Golf Carts				
		·	Firm/Company			٠.
		2409 N Federal Highway				
			Address			
		Delray Beach, FL 33483				
			City/State and Zip Code			
		Sales@SuperiorStreetPowe	rsports.com to be used for future annual report notificat	ion		
			•	10117		
For fintle	Hormation co	ncerning this matter, please c	an:		202	I
Nick Fra			954 516-0708 at ()		TAU	7
	N: ne of	Person		lephone Number	2021 AUS -3 PI	
Enclose:	check for the	e following amount:			天 つか。 公	
를 \$25 or	Hing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	

V ding Address:P gistration Section

Asion of Corporations

→ Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Superior Street Golf Carts, LLC

	(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on or ced Liability Company)	ur records.)		
The Artici Flor(du)	\sim of Organization for this Limited Liability Comparison of Figure 1. Since the number $\frac{L17000118668}{L17000118668}$.	any were filed on $\frac{05/31/20}{}$	17	_ and assigne	ed
This an.	ment is submitted to amend the following:				
A. If anis	iding name, enter the new name of the limited li	iability company here:			
The Lew	courst be distinguishable and contain the words "Limited Li	ability Company," the designat	ion "LLC" or the abbru	viation "L.L.C."	
Enter no	principal offices address, if applicable:				
<u>(Principal</u>	office address MUST BE A STREET ADDRESS)	<u> </u>			
<i>(Maihr</i> B. If arr	And high address, if applicable: Horse MAY BE A POST OFFICE BOX) Graphic The registered agent and/or registered office address here: http://doi.org/10.1006	•			istered
		Enter Florida street address			
		City	, Florida	Zip Code	
New Reci	ered Agent's Signature, if changing Registered Age	nt:			
Therei provisa = accept = being t = compa =	when the appointment as registered agent and a spart of all statutes relative to the proper and completely because of my position as registered agent a charge in the registered office of the charge in this charge.	ete performance of my di us provided for in Chapte	tties, and I am fan er 605, F.S. Or, if i	illiar with à, this documer	ıd

If Changing Registered Agent, Signature of New Registered Agent

g Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added If ames or remay a from our records: MGR: Janager AMBR : Authorized Member Title: Name Address . **Type of Action** MGR Thighley Holdings Group, LLC 3267 Saint Annes Drive _ □Add Boca Raton, FL 33496 ■Remove _____ □Change Sanchez Hughley MGR 3267 Saint Annes Drive Boca Raton, FL 33496 \square Add Remove .. S⊟Remove □Change _____ □ Add _____ □Remove

□ Change

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	07/15/2021	AIK	53	
	e is listed, the date must be specific and cannot be prior to date of filling or more than 90 days a	ptional) fter filing.) Pu	irsuant to	605,0
	at a inserted in this block does not meet the applicable statutory filing requirements. It is a tive date on the Department of State's records.	this date wil	ll not be	liste
	extive date on the Department of State & records.			
	e: a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of	(b) The 9	0th day a	after
	2021			
:	· · · · · · · · · · · · · · · · · · ·			
	9A			
	Signature of a member or authorized representative of a member			-