Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H180001604973)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : DEALER CONSULTING SERVICES, INC.

Account Number : I20010000121 : (305)758-9001 Phone

: (888)501-2390 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

Corporations@dcsmiami.com Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SPEEDART MOTORSPORTS, LLC

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JUN 0 1 2018

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Corporate Filing Menu

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TO:

Registration Section

COVER LETTER

Divi	ision of Corp	orations				
SUBJECT:	SPEEDART	MOTORSPORTS, LLC				
		Name of Limi	ted Liability Company	,		
The enclosed	Articles of A	Amendment and fee(s) are subr	nitted for filing.			
Please return	all correspor	ndence concerning this matter t	to the following:			
		Janixa Ramos				
			Name of Person			
	Dealer Consulting Services, Inc.					
			Firm/Company			
	7537 NW 7th Avenue					
			Address			
	Miami, FL 33150					
City/State and Zip Code						
	Corporations@dcsmiami.com					
		E-mail address: (t	to be used for future annu-t report notifi	cation)		
For further in	nformation co	oncerning this matter, please ca	ill:			
Janixa Rame	os		305 758-9001 at ()			
Name of Person Area Code Daytime Telephone Number			Telephone Number			
Enclosed is a	a check for th	e following amount:	·			
□ \$25.00 F	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	口 \$55.00 Filing Fer 名 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

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ARTICLES OF AMELIDMENT TO ARTICLES OF ORGANIZATION **OF**

SPEEDART MOTORSPORTS, LLC	. 44		
(Name of the Limited Ltability Compan (A Florida Limited Lin	y as it now appears on our ability Company)	records.)	_
The Articles of Organization for this Limited Liability Company w Florida document number L18000054738	vere filed on03/01/201	8 and	l assigned
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
		, ••	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation	on "LLC" or the abbreviation	n #TLL.C."
Enter new principal offices address, if applicable:			<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	<u>. </u>	<u> </u>	717
	• ! ·		*
	·	,	/ [3
Enter new mailing address, if applicable:		·: · ·	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		"	
Amuning address many being tool of the best			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:	ice address on our i	records, <u>enter the na</u>	me of the new
Name of New Registered Agent:		 -	
New Registered Office Address:			
	Enter Florida stree	et address	
	, Florida		
	City	Zip C	Code
New Registered Agent's Signature, if changing Registered Agent:	· ,		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pl being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	verform∷nce of my du rovidec for in Chapte	ties, and I am familia r 605, F.S. Or, if this c	r with and document is

If Changing Registered Agent, Signature of New Registered Agent

To: 8506:78383@rcfax con Fax: (850) 517-6383 Page 7 of 8 05/31/2018 8.50 AM $(((1118000160497\ 3)))$

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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>	Address	Type of Action
MGR	HONDROS, DEMETRIOS M	4775 COLLINS AVE G1004	
		MIAMI BEACH FL 33140	□ Remove
		ý	
MGR	XAKOUSTIS, ALEXANDROS	4775 COLLINS AVE G1004	Add
		MIAMI BEACH, FL 33140	□ Remove
			Change
			Remove
			Change
		· 	
		13.4 6.4	□ Remove
		<u> </u>	□ Change
			□ Add
		, H, .	□ Remove
			☐ Change
			CJ Add
			□ Remove
			□ Change

Dated

MAY 24

2018

Signature of a member or authorized representative of a member

DEMETRIOS MICHAEL HONDROS

Typed or printed name of signee

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Filing Fee: \$25.00