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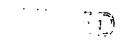
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COVER LETTER

TO:

TO: Registration Se Division of Cor			1
SUBJECT: Confederate	: Motorcycles LLC	•	
	Name of Lim	ited Liability Company	 -
			<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	!
Please return all correspo	ndence concerning this matter	to the following:	
	Ernest Lee		
		Name of Person	-
	Confederate Motorcycles I	.LC	
		Firm/Company	
	P.O. Box 550		
		Address	
	Lee, FL 32059		,
	180,117,020,07	City/State and Zip Code	
			<u>.</u>
		to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please c	all:	
Ernest Lee		at (386) 292-3360	·
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 17	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe	porations
, mmmooo.	- 	Tallahassee, FL	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2020 Jim 18 PH 3: 06

Confederate Motorcycles LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L Horida document number	.iability Company	were filed on April 3, 2018	and assigned
his amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name	of the limited lia	bility company	
here: Combat Motors LLC			
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Inter new principal offices address, if applic	cable:	2620 6th Avenue South	
Principal office address MUST BE A STREET ADDRESS		Birmingham, AL 35233	
Enter new mailing address, if applicable:		2620 6th Avenue South	
Mailing address MAY BE A POST OFFICE	BOX)	Birmingham, AL 35233	
B. If amending the registered agent and/or agent and/or the new registered office addre	ess here:	address on our records, enter the	name of the new registe
Name of New Registered Agent:	Emest Lee		
New Registered Office Address:	14548 182nd S	Enter Florida street address	<u></u>
	MaAlpin	Enter Florida Street address	33063
	McAlpin	Ciry , Florida	a
		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 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
			□Remove
			□ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

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Fective date, if other than the neffective date is listed, the date muste: If the date inserted in this becament's effective date on the D	st be specific and cannot be prior to date of filing lock does not meet the applicable statutory	(optional) or more than 90 days after filing.) Pursuant to 605,020 filing requirements, this date will not be listed as
ecord specifies a delayed effectivis filed.	re date, but not an effective time, at 12:01 a	a.m. on the earlier of: (b) The 90th day after the
June 15	2020	Į.
ted	··	
ted	 ·	
ited	Signature of a member or authorized represent	tative of a member