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то:	Registration Se Division of Cor							
CUDI		O SORT LLC (SHOULD BE	MKG AUTO SPORT LLC)					
Name of Limited Liability Company								
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please	return all correspo	ndence concerning this matter	to the following:					
		MARCO J MACHUCA						
			Name of Person					
		MKG AUTO SPORT LLC	:					
		·	Firm/Company					
		1455 W LANDSTREET R	COAD STE 419					
			Address					
		ORLANDO, FL 32824						
			City/State and Zip Code					
		MARCO1825MACHUCAG						
		E-mail address: (to be used for future annual report notifi	cation)				
For fur	rther information co	oncerning this matter, please co	all:					
MARG	CO J MACHUCA		407 936-8604 at ()					
	Name of	f Person	Area Code Daytime	Telephone Number				
Enclos	ed is a check for th	e following amount:						
\$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 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

MKG AUTO SORT ane 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 $\frac{05/30/2018}{2}$ and assigned Florida document number 1.18000134212 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MKG AUTO SPORT LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LL.C." 1455 W LANDSTREET RD Enter new principal offices address, if applicable: STE 419 (Principal office address MUST BE A STREET ADDRESS) ORLANDO, FL 32824 1455 W LANDSTREET RD Enter new mailing address, if applicable: STE 419 (Mailing address MAY BE A POST OFFICE BOX) ORLANDO, FL 32824 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: New Registered Office Address: Enter Florida street address

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.

New Registered Agent's Signature, if changing Registered Agent:

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Title</u> Name Address Type of Action □ Add ☐ Remove □ Change ☐ Add □ Remove _□ Change 🗆 Add ☐ Remove _____ Change □ Add ☐ Remove ☐ Change □ Add _□ Remove _____ Change _□ Add □ Remove ☐ Change

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Typed or printed name of signee

Filing Fee: \$25.00