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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

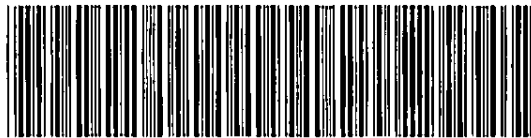
(Business Entity Name)

(Document Number)

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THE UNIVERSITY OF CHICAGO

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FEB 20 2013
T. LEVEUX

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FVA MOTORCYCLE ASSOCIATION 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:

Fermin Jimenez

Name of Person

FVA MOTORCYCLE ASSOCIATION, LLC.

Firm/Company

14359 Miramar Pkwy. # 198

Address

Miramar, FL. 33027

City/State and Zip Code

fva.motorcycle.association.llc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fermin Jimenez

at (305)

613-9430

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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**

FILED

FVA MOTORCYCLE ASSOCIATION, LLC.

(Name of the Limited Liability Company as it now appears on our records) **2018 FEB 12 PM 32**
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/09/2018 and assigned
Florida document number L18000238910.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

FVA Motorcycle Association, LLC.

14359 Miramar Pkwy. # 198

Miramar, FL. 33027

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FVA Motorcycle Association, LLC.

14359 Miramar Pkwy. # 198

Miramar, FL. 33027

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:

Fermin Jimenez

New Registered Office Address:

2201 SW 132 Ave.

Enter Florida street address

Miramar

Florida

33027

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 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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Fermin Jimenez	2201 SW 132 Ave. Miramar, FL. 33027	<input checked="" type="checkbox"/> Add
		VELAZQUEZ, MANUEL	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Stan Bostic	14408 SW 158th Path Miami, FL. 33196	<input checked="" type="checkbox"/> Add
		CIACCIA, THEODORE	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
		SQUILLACE, JOSEPH	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
		LOPETEGUI, HECTOR	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

[Signature]

Typed or printed name of signee