Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000304605 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRIPP SCOTT, P.A.

Account Number : 075350000065

Phone : (954)525-7500

: (954)761-8475 Fax Number

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

2	Address:				

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ETAILORED, LLC

Certificate of Status Certified Copy 03

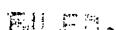
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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



H19000304605

ARTICLES OF O	RGANIZATI F 5	ON FRALE 13
ETAILORE	ED, LILC	MIN DET IN A HE ES
(Name of the Limited Liability Comm (A Florida Limited I		William Andrew Property
The Articles of Organization for this Limited Liability Company	were filed on February	uary 6, 2019 and assigned
Florida document number L19000037124		
This amendment is submitted to amend the following:		
A. It amending name, enter the new name of the limited liab	ility company here	<u>.</u> :
REBEL MOTOR COMPANY, LLC		
The new name must be distinguishable and contain the words "Limited Liabli	lity Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1234 NE 7th A	V. Fort Lauderdale, FL 33304
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	1234 NE 7th A	/. Fort Lauderdale, FL 33304
(Mulling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered ugent and/or the new registered office address her		our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florid	la street address
	City	, Florida
	J.,,	-+

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

Page 1 of 3

MGR = Manager

H1900304605
If amending Authorized Person(s) authorized to manage, enter the title, same, and address of each person being added or removed from our records:

Title	Name	Address	Type of Action
			□ Add
			□ Remove
			☐ Clininge
	: .		
			☐ Remove
			☐ Change
			□ Remove
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Note: docume	ve date, if other than the date of filing:
(b) THE	South day after the record is theu.
Dated_	· · · · · · · · · · · · · · · · · · ·
	Signature of a member of amember

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