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R. WHITE. FEB 13 2020

COVER LETTER

TO:

TO: Registration S Division of Co		,	
CLUSTICT	Express OTOW, LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Tommy D. Permenter, Jr.,	Esquire	
		Name of Person	
	The Permenter Law Firm,	P.A.	
		Firm/Company	
	2201 S.E. 30th Avenue, St	nite 202	
		Address	
	Ocala, Florida 34471		
		City/State and Zip Code	
	Tommy@Permenterlaw.com		·
For further information (E-mail address: (concerning this matter, please c	to be used for future annual report no all:	tification)
Tommy D. Permenter, J	r., Esquire	352 622-1811 at ()	
Name (of Person		me Telephone Number
Enclosed is a check for t	he following amount:		
\$2,825.00 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 Addre Registration		Street Address:	oction
Division of 0		Registration S Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	r に 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Racewash Express OTOW, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

75 - 75 - 2:07

The Articles of Organization for this Limited Liability Company	were filed on August 6,	2019 and assigned
Florida document number L19000200366		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Racewash Express W200, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designati	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	-	
		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record:	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	vet address
		, Florida
	Cuy	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>	Name	Address	Type of Action
			□ Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
 			□Add
			□Remove
			[]Change
			∐Add
			Remove
			□Change

Effective date, if other than the date of filing:		
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. 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 thord is filed. Dated		
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Signature of a member or authorized representative of a member	Dated	January 14 . 2020
Signature of a member of authorized representative of a member		JUH C
		Signature of a member of authorized representative of a member
Merritt C. Fore, III		Merritt C. Fore, III

Filing Fee: \$25.00