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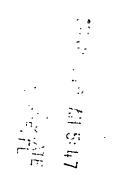
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A. HUNT

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COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT: THUNDER IN	MPORTS LLC			
	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	SYLVIO ROMERO MAR'	TINS CARNEIRO		
		Name of Person		-
	SC TAX ACCONTING AND			-
		Firm/Company		7:
	3814 NW 23RD CT			<u>'.</u> ;
		Address		•
	COCONUT CREEK, FL, 3:		·	9 // 5: 47
		City/State and Zip Code	<u> </u>	ूं या
	sylvio@sctaxflorida.com E-mail address: (to be used for future annual repor	t notification)	17
For further information ec	oncerning this matter, please ca	all:		
SYLVIO CARNEIRO		at (<u>954</u>) <u>395-569</u> 2	2	
Name of	Person	Area Code Da	aytime Telephone Number	
Enclosed is a check for the	e following amount:			
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THUNDER IMPORTS LLC

(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on ou da Limited Liability Company)	r records.)	
The Articles of Organization for this Limited Liability	Company were filed on 11/27/201	9	and assigned
Florida document number L19000293211			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lir	mited liability company here:		
MOTORSPORT VIDEOS LLC			
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation	on "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			May 16
Principal office address MUST BE A STREET ADD	ORESS)	•	-m.
		•	
			.
Enter new mailing address, if applicable:		(3) (3) (1)	
Mailing address MAY BE A POST OFFICE BOX)		- Ti	ហ៊ូ
2= 1100, 0,100, 001,			
3. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	ed office address on our records,		of the new regist
		Florida	
	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
			□Add
			□Remove
			□Change
			□Remove
			Change
******			Add
		 -	☐ Remove
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ctive date, if other than the date of filing:effective date is listed, the date must be specific and cannot be prior t	(optional)	
effective date is listed, the date must be specific and cannot be prior to If the date inserted in this block does not meet the application.	o date of filing or more than 90 days after filing.) Pursible statutory filing requirements, this date will re-	uant to 605,02 not be listed
ment's effective date on the Department of State's records.	are statutory ming requirements, this care with	iot be fisted
ord specifies a delayed effective date, but not an effective tir	ne, at 12:01 a.m. on the earlier of: (b) The 90th	n day after th
filed.		
d MARCH 07TH		
a -	4	
//- A - 9		
Signature of a number or author	rized representation of a month	