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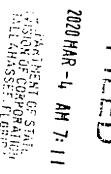
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MAR 23 2020 S. YOUNG

COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

subject: <u>Bu</u>	LLET AUTOMO-	TIVE MACHINE ited Liability Company	LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JA	KE A. FICHTM	ER
		Name of Person	
	Bullet	AUTOMOTIVE Firm/Company	MACHINE LLC
	9213 DEN	Address	······································
	HUDSON	City/State and Zip Code	<u> </u>
	Bulle 7 E-mail address: (T . A . M. HOTMGIL to be used for future annual report noti	· Com
For further information c	oncerning this matter, please co	all:	
	-	at (<u>127</u>) <u>200</u> Area Code Daytim	- 3695
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the			
YAY\$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 Addres		Street Address:	_
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632	•	The Centre of T	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BULLET	AUTOMOTIVE M	TACHINE LEGER 7	
	Liability Company as it now appears Florida Limited Liability Company)		3. 1
The Articles of Organization for this Limited Liabi Florida document number <u>L 2000053</u>	lity Company were filed on FE	- Til ot	ٽو ا
is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: In the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Inter new principal offices address, if applicable: In the new mailing address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: In the new mailing address, if applicable: In the new mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered			
A. If amending name, enter the new name of th	e limited liability company here	<u>e</u> :	
Enter new principal offices address, if applicabl	e:	ignation "LLC" or the abbreviation "L.L.C."	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered affice address h		ords, enter the name of the new register	<u>ed</u>
Name of New Registered Agent:			
New Registered Office Address:	Enter Florid	a street address	
-	City	. Florida Zip Code	
	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>	Address	Type of Action
AMBR	Robert L. FichIner JR.	1290 CALNEY AVE	<u>M</u> Add
		lecanto, 71. 34461	□Remove
			🗆 Change
			□Add
			□Remove
			□Change
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			☐ Change
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(If an ef <u>Note:</u>	ive date, if other than the date of filing:
e reco ord is fi	d 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 led.
Dated	MAYCH 2 . 2020.
	Cha Lichtman
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00