120000108599

	questor's Name)	
(Rec	(nestor 2 Marile)	
	fress)	
(Add	ness)	
(Add	dress)	
- 1841		
(City	//State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	





500371409075

08/12/21--01018--008 **60.00

08/12/21--01018--008 **30.00

DOS-4500453-4835443755 DEPOSIT OHLY 60.00 08/12/21--01018--008

2021 AUG 12 PM 2: 06

A DA

COVER LETTER

TO: Registration Set Division of Cor				
	ADDX, L.L.C.			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filling.		
Please return all correspo	ondence concerning this matter	to the following:		
	CYNTHIA L. WREN			
		Name of Person		
	OFFROAD ADD-X, L.L.C	C.		
		Firm/Company		21
	6774 BILL LUNDY RD)21 Fi
		Address	7	5
	LAUREL HILL, FL 3256	7-8300		2021 AUG 12 PH 2: 0
		City/State and Zip Code		; □:
	OFFROADADDX@GMA			
	E-mail address: (to be used for future annual report notifi	cation) 17	01
For further information of	concerning this matter, please c	all:		
MIKE WREN		850 826-8166		
Name o	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is e	atus &
<u>Mailing Addre</u> Registration		Street Address: Registration Sec	tion .	
Division of C		Division of Corp		
P.O. Box 632	27	The Centre of Ta		
Tallahassee.	FL 32314	2415 N. Monroe	Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OFFROAD ADDX, L.L.C.		
(Name of the Limited Liah (A Flor	illity Company as it now appears on our records, ida Limited Liability Company))
The Articles of Organization for this Limited Liability	Company were filed on 04/21/2020	and assigned
Florida document number L20000108599		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
OFFROAD ADD-X, L.L.C.		202
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC"	or the abbreviation "L.E.C."
Enter new principal offices address, if applicable:		2
(Principal office address MUST BE A STREET ADI	DRESS)	
		701 7
		PTE PTE 1905
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register	red office address on our records, <u>enter t</u> l	he name of the new register
agent and/or the new registered office address here	:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	City	zīp 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>	Type of Action
			□Add
		.	Remove
			□Change
			□Add
		•	Remove To Change
			2 PBAdd 2: 0 PRemove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Remove
			□Change

. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
-		
_		
-		
-		_
-		
		-
	7021	-
	TO THE	- 1
	5 12	**************************************
		111
		المنطقة المنطقة
	—————————————————————————————————————	-
	int or	_
		_
		_
		_
N' t	ctive date, if other than the date of filing:	05,0207 (3), sted as the
If the rec record is	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day af filed.	fter the
Date	de August 9 2021.	
	Signature of a member or authorized representative of a member	
	J	
	CYNTHIA L WREN Typed or printed name of signee	