11/17/2020

Florida Department of State
Division of Corporations

Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TEK MOTORSPORTS LLC

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COVER LETTER &

	tegistration Se Division of Cor				
SHBIEC.		ORSPORTS LLC			
SUBJEC*					
		Amendment and fee(s) are sub-			
Please reti	arn all correspo	ndence concerning this matter	to the following:		
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City/State and Zip Code TEK.motorsports99@gmail.com					
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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TEK MOTORSPORTS LLC (Name of the Limited Liability Compar	ny as it now appears on our re	cords.)		
(A Florida Limited L	iability Company)			
he Articles of Organization for this Limited Liability Company were filed on 09/11/2020 and assignd lorida document number L20000285282				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		20.00		
		¥ :		
Enter new mailing address, if applicable:		7		
(Mailing address MAY BE A POST OFFICE BOX)		A 117		
(Maining address 1971) BE 17 OB OT 1.100		ن يو نتي		
		2 0 0		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	Mice address on our rec e:	ords, enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street a	duress		
		, Florida Zip Code		
	Ciry	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my dutie provided for in Chapter (s. and I am familiar with and 505, F.S. Or, if this document is		

If Changing Registered Agent, Signature of New Registered Agent

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
AMBR	EB VAZQUEZ		
		2320 ZALTANA CIR MINNEOLA, FL 34715	≅ Remove
			Change
AMBR	Eberardo Vazquez	2320 Zaltana Cir. Minneola, Florida 34715	
			☐ Remove
			Remove S
			□ Add
		**	□ Remove
		•	Change
			□ Remove
			Change
			D Add
			☐ Remove

Eberardo Vazquez

Page 3 of 3
Filing Fee: \$25.00

Typed or printed name of signee