L21000070889

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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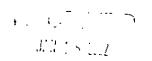
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COVER LETTER

ection rporations	
Aotorsports, L.L.C.	
Name of Lin	nited Liability Company
Amendment and fee(s) are sub	emitted for filing.
ondence concerning this matter	to the following:
Perry Douglas West, Esqu	ire
	Name of Person
Perry Douglas West Chart	ered
	FirmvCompany
Post Office Box 427	
	Address
Cocoa, Florida 32923	
	City/State and Zip Code
E-mail address: (to be used for future annual report notification)
concerning this matter, please c	all:
Ч	321 636-5804 Ext 225
of Person	Area Code Daytime Telephone Number
puresta pe	rydougleswest. Com.
he following amount:	
☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
<u>ss:</u> Section	Street Address: Registration Section
Corporations	Division of Corporations
	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	Perry Douglas West, Esqu Perry Douglas West, Esqu Perry Douglas West Chart Post Office Box 427 Cocoa, Florida 32923 pwest@perrydouglaswest,c E-mail address: (concerning this matter, please concerning this matter, please concerning this matter.

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TROPICA	AL MOTORSPORTS, L.L.C.		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)		
The Articles of Organization for this Limited Liability Florida document number L21000070889	Company were filed on 02/10/2021	_ and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here:		
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the abbre	eviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	ORESS)		_
			—
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			_
B. If amending the registered agent and/or register agent and/or the new registered office address here:		of the new regi	stere
		202	
Name of New Registered Agent:		~ ~	
· 			
New Registered Office Address:	Enter Florida street address	<u></u> 9	_
	174 a.u.t. A.u.	ୁ ≱ୁ ∜	
	City , F10F1GR	Zip Coda	⋽
New Registered Agent's Signature, if changing Register	City , Florida, Florida	TATI	
I hereby accept the appointment as registered agen- provisions of all statutes relative to the proper and accept the obligations of my position as registered of being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my duties, and I am fan agent as provided for in Chapter 605, F.S. Or, if red office address, I hereby confirm that the limit	niliar with and this document	ľ

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
MGR	ROBERT J. LINDSEY, JR	7400 4TH STREET	= Add
		VERO BEACH, FLORIDA 32968	□Remove
			Change
AMBR RALNA LINDSEY REEL	7400 4TH STREET		
		VERO BEACH, FLORIDA 32968	□Remove
AMBR AMANDA J. KASTENSMIDT	AMANDA J. KASTENSMIDT	7400 4th STREET	⊟ Add
	VERO BEACH, FLORIDA 32968	□Remove	
			Change
			□Add
			□Remove
			□ Change
			🗖 Add
			□Remove
			☐ Change
			DAdd
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

AMENDED LISTING OF MEMEBERS	OWNERSHIP INTEREST
1. ROBERT J. LINDSEY, SR.	52%
2. ROBERT J. LINDSEY, JR.	16%
3. RALNA LINDSEY REEL	16%
4. AMANDA J. KASTENSMIDT	16%
ve date, if other than the date of filing:	(optional)
ective date is listed, the date must be specific and cannot b	optional) e prior to date of filing or more than 90 days after filing.) Pursuant to 6 applicable statutory filing requirements, this date will not be li

Dated JANUARY. 2022

Dated Robert J. LINDSEY, SR.

Typed or printed name of signee

If 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 the

Filing Fee: \$25.00