## L21000 337827

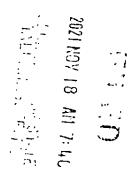
(Re	questor's Name)	
(Ad	dress)	
	dress)	
(/10	uicse)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





600376299086

11/18/21--01011--005 \*\*25.00



**A. BUTLER** DEC - 7 2021

## **COVER LETTER**

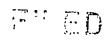
	Registration Se Division of Cor		•	•	
	2.0 Motorsp	ports LLC	•	•	
SUBJEC	T:	Name of Limi	ted Liability Company	<del></del> . ,	
The enck	osed Articles of	Amendment and fee(s) are sub-	nitted for filing.		
Please re	tum all correspo	indence concerning this matter	to the following:		
		Michael F. Cialdella			
			Name of Person		
		2.0 Motorsports			
			Firm/Company		
		7129 Commercial Way			
			Address		
	Weeki Wachde FL. 34613				
			City/State and Zip Code		
		mfcialdella@gmail.com	to be used for future annual report no	ntification)	
Ear family	sar information s	concerning this matter, please co			
		concerning this matter, predict e	219 477 0746		
Michael	F. Cialdella	- CD	at (	me Telephone Number	
	Name C	of Person	Area Code Dayn	the receptione realizes.	
Enclose	d is a check for t	the following amount:			
≣ \$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 Addre		Street Address:	Section	
	Registration Division of 0		Registration S Division of C		
	P.O. Box 63.		The Centre of	Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2021 ROV 18 AM 7: 40

		7.5T/HE 7.57.19
The Articles of Organization for this Limited Liability Company were fited on July 26 202  Florida document number 1.21000337827		, FF, FF
	1	
Florida document number 1.21000337827		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation	"LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	·	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		_
B. If amending the registered agent and/or registered office address on our records, <u>agent and/or the new registered office address here:</u>	enter the name	of the new register
agent and/or the new registered office address here.		
Name of New Registered Agent:		
	<u> </u>	
New Registered Office Address:  Enter Florida street	address	<del></del>
	-	
City	_, Florida	7in Code
New Registered Agent's Signature, if changing Registered Agent:		up cone
	1.5.1	
I hereby accept the appointment as registered agent and agree to act in this capacity provisions of all statutes relative to the proper and complete performance of my dutical accept the obligations of my position as registered agent as provided for in Chapter of the obligations of my position as registered agent as provided for in Chapter of the solution of the provided to merely reflect a change in the registered office address. I hereby confirmance that the provided in writing of this change.	es, and I am fai 605, F.S. Or. if	miliar with and this document is

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			Change
-			□Add
			□Remove
			□Change
			□Remove
			□Change
			\ \ \ \
			□Remove
		<del></del>	□Change
			□Add
			□Remove
			[]Change
	<u></u>		
			□Remove
			□ Chango

				<del></del>		
					<del></del>	<del></del>
					•	
	····					
+14				n=		
					•.··· · · • · · · · · · · · · · · · · ·	
	<del></del>					
· · · · · · · · · · · · · · · · · · ·						
			<del></del>			
					_	
ffective date, if other than the date an effective date is listed, the date must be store: If the date inserted in this block a locument's effective date on the Depart	pecific and cannot be pride the app	plicable s	of filing or more stutory filing r	e than 90 days after equirements, this	filing.) Pursuant to	5 605.0207 ( : listed as t
record specifies a delayed effective dat d is filed.	e, but not an effectiv	e time, a	12:01 a.m. on	the earlier of: (b)	) The 90th day	after the
November 12	. 2021	·				

Filing Fee: \$25.00