Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000202594 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Email Address:

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN E11VN JET SKI RENTALS LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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Help

## ARTICLES OF AMENDMENT TÒ ARTICLES OF ORGANIZATION. **OF**

E11vn Jet Ski Rentals LLC	<u>-</u>		
( <u>Name of the Limited Liaf</u> (A Flor	nility Company as it now appears on our records.) ida Limited Liability Company)		
The Articles of Organization for this Limited Liability Florida document number <u>L21000347248</u>	Company were filed on 08/02/21	and assig	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	imited liability company here:		
XI Motorsports LLC			
The new name must be distinguishable and contain the words "L	limited Liability Company," the designation "LLC" or the a	bbreviation "L.L	.C.``
Enter new principal offices address, if applicable:			<del></del>
Principal office address MUST BE A STREET AD	DRESS)		
	<del></del>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			<del>-</del>
B. If amending the registered agent and/or registe		ne of the new	registered
agent and/or the new registered office address her	<u>e</u> :	022 J	
			2
Name of New Registered Agent:	4.5		
New Registered Office Address:			<u>.⊠</u> €
	Enter Florida street address		<i>[**</i>
	, Florida	Zip Chile	<del>.</del>
	City	Zip C <del>Sde</del>	

## 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.

City

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
			□Add
			Remove
			☐ Change
			□Add
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			DAdd
			Remove
			□ Chara

Effective date, if other than the date of filing:	_	
If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  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 ord is filed.  Dated June 10 2022  Signature of a member or authorized representative of a member		
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Signature of a member or authorized representative of a member		
	Datec	June 10 2022
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Morgan Noble		

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Filing Fee: \$25.00