# L21000508/3/

(Re	equestor's Name)	
(Ac	ldress)	·
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	<i>⇒</i> #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	J, HC	RNE
	SEP 1	2 2022

Office Use Only



200393789462

09/12/22--01029--005 \*\*25.00

Z022 SEP 12 PM 12: 06
SECRETARY FOR TALLY MANAGEMENT AND TALLY MANAGEMEN

, .

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Steel Horse motor eyeles (2C, Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Stephen C Martin
Steel Horse motorcycles (1C
407 us Hwy 41 Address
INVERNESS Florida 34442 City/State and Zip Code
5+eelhors Emotoreveles Web gmail. eDan E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Steve NATIN at (35Z) (597 – 0593 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

## Street Address:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certificate of Status &

(additional copy is enclosed)

Certified Copy

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FU ED

 $t_{i}^{1}$ 

2022 SEP 12 AM 9: 46

SteelhorsE Motor cycles LLC SECRETARY OF STEEL (Name of the Limited Liability Company's it now appears on our records.)  (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on November 30 and assigned florida document number <u>C 21000 508131</u> .
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 abbreviation "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)
3. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registere</u> agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:  Enter Florida street address
, Florida
•
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>	Address	Type of Action
MGR	Stephen C. MANTIN	Hernmudo Fl. 34442	🗆 Add
		Hernomudo Fl. 34442	Z □Remove
			&Change
<del></del>			□Adđ
			Remove
			□ Change
<del> </del>			🗀 Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
<del></del>			🗆 Add
			□Remove
		<u> </u>	Change
			□Add
			□Remove
			□ Change

			<del></del>	, , , , , , , , , , , , , , , , , , ,	
					<del></del>
			<u> </u>	<del></del>	<del></del>
<del></del>					
		· <u>·</u>			
			<del></del>		
					<del></del> -
	•		· · · · · · · · · · · · · · · · · · ·		
		_ <del></del>			**
			· · · · · · · · · · · · · · · · · · ·		
					<u> </u>
					<del></del>
					<del></del>
ite: If the date inso	her than the date of fi ted, the date must be specific erted in this block does no date on the Department of	ot meet the applicable	112022 late of filing or more than e statutory filing requir	(optional) 90 days after filing.) Pursu ernents, this date will no	ant to 605.020 ot be listed a
ecord specifies a de is filed.	elayed effective date, but	not an effective time	, at 12:01 a.m. on the c	arlier of: (b) The 90th	day after the
ted					
	Signature C				
<u>;-</u> -2_1		of a propher or authoriz	ed representative of a me	mber	

Filing Fee: \$25.00