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T. MATTHEWS

FEB - 3 2022

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: UNDE	Reground Diname of Lim	I CSC   Perform ited Liability Company	nance, LLC
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Matthew	Danano Name of Person	
	Undergra	nd Diesel Pe	erformance, LLC
	<u>5000-18 U</u>	S Hwy 17 5. =	#180
	Fleming Is	Ond, FL 37C City/State and Zip Code	<b>x</b> 03
	clonanco_S	0500 amail.com	nication)
For further information of	oncerning this matter, please co	all:	
MOHHOW D Name of	ananoo Person	at ( <u>904</u> ) <u>383 –</u> Area Code Daytime	C 578 c Telephone Number
Enclosed is a check for th	e 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 Address Registration S Division of Co P.O. Box 632	Section orporations 7	Street Address: Registration Seconic Division of Core The Centre of T	porations allahassee
Tallahassee, F	'L 32314	2415 N. Monroe	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 17/1/71 and assigned Florida document number <u>L 2100050898</u>7 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 "LLC." 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

\_, Florida \_\_\_

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	Andrew Fultz	4685 Petunia Ave.	\( \frac{1}{2} \) Add
		4685 Petrnia Ave. Middleburg, FL 32068	□ Remove
			□Change
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ct	ive date, if other than the date of filing:(optional)
cfi	ective 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
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
	d 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 led.
ed	January 16 2022.
	ATTHE Danke
	Signature of a member or authorized representative of a member
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