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PICK-UP WAIT MAIL
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T. MATTHEWS MAY 1 1 2022

COVERLETTER

TO:

Registration Section
Division of Corporations

Banshee Po	wer Sports, LLC	·	v
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return all correspo	ndence concerning this matter	to the following:	
	Robert J Doherty		
		Name of Person	
	Banshee Power Sports, LL	C	
		Firm/Company	
	10965 110th Ave		
		Address	
	Largo, Florida 33778		
		City/State and Zip Code	
	support@BansheePowerSpo	orts.com	
	E-mail address: (to be used for future annual report	notification)
For further information c	oncerning this matter, please ca	all:	
Robert J Doherty		727 439-8088 at ()	3
Name o	f Person	Area Code Day	ytime Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 5 Division of C P.O. Box 632 Tallahassee.	Section Corporations 17	The Centre of	Section Corporations of Tallahassee nroc Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION SECRETARY OF STATE DIVISION OF CORPORATIONS

Banshee Power Sports, LLC

22 APR 15 AM 11: 24

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compar	ny were filed on 12/29/2021	and assigned
Florida document number L22000007334		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "LEC"	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)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter tl</u>	he name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
	City	Zip Code

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(\$) authorized to manage, enter the title, name, and address of each person—being ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Р	Robert J Doherty	10965 110th Ave Largo, Florida 33778	= Add
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			□Remove
			TChange
			<u>U</u> Add
			L.J.Remove
			Change
			⊐Add
			□Remove
			[Change
			
			□Remove
			□Change
			= Add
			□Remove

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