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SECRETARY OF STA

COVER LETTER

TO:

TO: Registration S Division of Co				
SUBJECT: DRIFT MO	OTOR SALES LLC			
·		ited Liability Company	·	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		
	RODRIGO P SILVA			
		Name of Person		
	RS ACCOUNTING AND	TAX SERVICES INC		
		Firm/Company		
	10 FAIRWAY DRIVE SU	IITE 201A		
		Address		
	DEERFIELD BEACH, FL	. 33441		
		City/State and Zip Code		
	RODRIGO@RSACCOUN			
	E-mail address: (to be used for future annual report noti	ification)	
For further information of	concerning this matter, please co	all:		
RODRIGO P SILVA		at (954) 623-7615		
Name o	of Person		ne Telephone Number	
Enclosed is a check for t	he 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		<u>Street Address:</u> Registration Se	ection	
Registration Section Division of Corporations		-	Division of Corporations	
P.O. Box 632	27	The Centre of T	Fallahassee	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 AUG -4 AM 10: 59

DRIFT MOTOR SALES LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records LLAHASSEE, fit,

Florida document number L22000326022		
- I fortua document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
NONE		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LEC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	4211 N ORANGE BLOSSOM TRAIL	
(Principal office address MUST BE A STREET ADDRESS)	STE A-8	
	ORLANDO FL 32804	
Enter new mailing address, if applicable:	4211 N ORANGE BLOSSOM TRAIL	
(Mailing address MAY BE A POST OFFICE BOX)	STE A-8	
Mauing duaress MAY BE A POST OFFICE BOX		
	ORLANDO FL 32804	
	ORLANDO FL 32804	
B. If amending the registered agent and/or registered office a		e of the new register
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B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:		e of the new register
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B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:		e of the new register
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the nam Enter Florida street address	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the nam	

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

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	FELICISSIMO LOPES, BRENO A	4211 N ORANGE BLOSSOM TRAIL	□Add
		STE A-8	□Remove
		ORLANDO FL 32804	Change
MGR	CASTRO LOPES, LORRAINE AN	4211 N ORANGE BLOSSOM TRAIL	□Add
		STE A-8	🗀 Remove
		ORLANDO FL 32804	≘ Change
			□Add
			□Remove
			□Change
			□Remove
		·	□Change
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