Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H220004096103)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : 120180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MEG RACING LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

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To: 18506176383 From: 12147128131 Date: 12/05/22 Time: 0:03 AM Page: 02/04

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF (((H22000409610 3))) ((H22000409610 3))) ARTICLES OF AMIL: 27

MEG RACING LLC

(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 Comp	any were filed on	09/22/2022 and assigned
Florida document number L22000413627		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company	y here:
The new name must be distinguishable and contain the words "Limited L	ability Company," th	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)		
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our	ir records, <u>enter the name of the new registere</u>
Name of New Registered Agent:		
New Registered Office Address:		
		Florida street address
	City	Florida Zip Code
Nam Danistanad Saart's Signatura if charging Danistanad Sa		χιρ €ουε
New Registered Agent's Signature, if changing Registered Age		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complacept the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	lete performance as provided for ti	of my duties, and I am familiar with and in Chapter 605, F.S. Or, if this document is
II (Changing Registered	I Agent, Signature of New Registered Agent

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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

(((H22000409610 3)))

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Melanie Casse	13306 Westbury Way	■ Add
		Goshen, KY, 40026	□Remove
			Change
			□ Add
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.			DAdd
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			Change (((H22000409610 3)))

				# 1 (((H2200040)9610 3))
D. If am e	ending any other information	on, enter change(s) here	: (Attach additional sh eets	on UF 21.14 Sitt,	
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3. Effecti	ve date, if other than the da	ate of filing:		_ (optional)	
Note:	we date, if other than the date cutve date is listed, the date must be If the date inserted in this blockent's effective date on the Department.	k does not meet the applica	o date of filing or more than 90 d ble statutory filing requireme	ays after filing) Pursuant to 60: ints, this date will not be list	s 0207 (33(b) ed as the
f the record ecord is fil	d specifies a delayed effective d ed	ate, but not an effective tin	ne, at 12 01 a.m. on the earlie	ar of (b). The 90th day afte	the
Dated	November 29th	2022			
	Ente 17				
	Sı	gnature of a member or author	zed representative of a member	-	
	Erika Wager				
		Exped or printed	I name of signee	·-·-·	

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