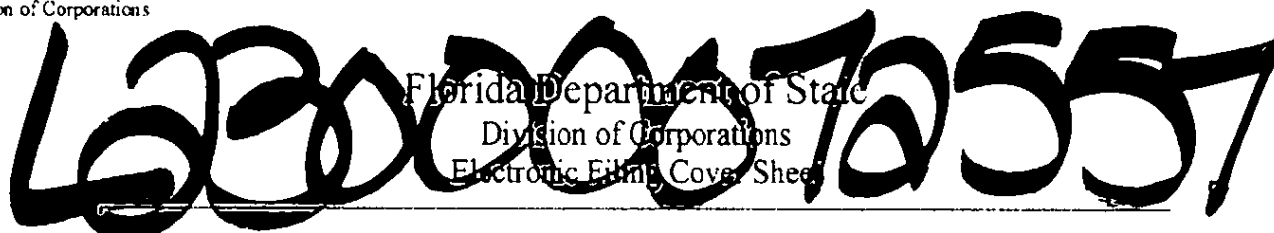


Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : JOEL AND MARCIA PINEIRO
Account Number : 120230000030
Phone : (443) 286-9326
Fax Number : (813) 590-0878

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

Email Address: joel@osirisglobalconsulting.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PURE MOTORS GROUP LLC**

Certificate of Status	1
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JUL 27 2023

COVER LETTER

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TO: **Registration Section**
Division of Corporations

SUBJECT: Pure Motors Group LLC

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:

Joel Pineiro

Name of Person

Osiris Global Consulting, LLC

Firm/Company

3035 W Asbury Place

Address

Tampa, FL 33611

City/State and Zip Code

joel@osirisglobalconsulting.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joel Pineiro

443

286-9326

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Pure Motors Group 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 Company were filed on 02/08/2023 and assigned
Florida document number L23000072557.

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:

5001 S. Westshore Blvd

(Principal office address MUST BE A STREET ADDRESS)

Suite B

Tampa, FL 33611

Enter new mailing address, if applicable:

11557 Redbridge Drive

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32824

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

City

Florida

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

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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:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AP	Joel Pineiro	3035 W Asbury Place	<input type="checkbox"/> Add
		Tampa, FL 33611	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Leonardo D Tinoco	11957 Redbridge Drive	<input type="checkbox"/> Add
		Orlando, FL 32824	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MBR	Kevin T Tinoco	911 Memurdo Circle	<input type="checkbox"/> Add
		Castle Rock, CO 80108	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated July 25th 2023

R. D. Thomas

Signature of a member or authorized representative of a member

Leonardo D Tinoco, Member

Typed or printed name of signee

Filing Fee: \$25.00

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