L23000101758

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2000)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Registered Agent Signature

Office Use Only



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07/17/23--01014--002 **25.00

SECRETARY OF STATE

2023 AUG 23 AM 8: 32

AUG 2 4 2023 D CUSHING

COVER LETTER

TO: Registration Se Division of Cor								
	YCLE PARTS DISTRIBUTOR	RLLC						
SUBJECT:	Name of Lim	ited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.						
Please return all correspo	ondence concerning this matter	to the following:						
	Juan Diaz							
		Name of Person	_					
	JD Advisers Group, Co							
	 	Firm/Company	_					
	2598 E Sunrise Blvd Suite	2006						
		Address	_					
	Fort Lauderdale, FL 3330-	4-3230	2 (
		City/State and Zip Code	2023 AUG 23 SECRETARN					
	juan.diaz@jdadvisersgroup	.com to be used for future annual report notification)	106 U					
For further information of	concerning this matter, please c		,) ``					
Angie Cinto		954 256-8117 at ()	AH 8: 32					
Name o	of Person	Area Code Daytime Telephone Number	32					
Enclosed is a check for t	he following amount:							
□ \$25.00 Filing Fee	\$25.00 Filing Fee \$\Bigsquare \$\$30.00 Filing Fee & \Bigsquare \$\$55.00 Filing Fee & \Bigsquare \$\$60.00 Filing Fee & \Bigsquare \$\$60.00 Filing Fee & \Bigsquare \$\$Certificate of Status & \Bigsquare \$\$Certified Copy (additional copy is enclosed) & \Bigsquare \$\$Certified Copy							
Mailing Addre Registration	Section	Street Address: Registration Section						
Division of C P.O. Box 633	-	Division of Corporations The Centre of Tallahassee						

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

RECEIVED

Tallahassee, FL 32314

AUG 2 3 2023



August 16, 2023

JUAN DIAZ 2598 E SUNRISE BLVD SUITE 2006 FORT LAUDERDALE. FL 33304-3230

SUBJECT: MOTORCYCLE PARTS DISTRIBUTOR LLC

Ref. Number: L23000101758

We have received your document for MOTORCYCLE PARTS DISTRIBUTOR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 923A00018779

Anissa Butler Regulatory Specialist II

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOTORCYCLE PARTS DISTRI	BUTOR LLC			ET 6			
(Name of the Limi	ted Liability Compa (A Florida Limited)	ny ay it now appears Liability Company)	on our records.)	23 P			
The Articles of Organization for this Limited I. Florida document number <u>L23000101758</u>	iability Company	were filed on Febr	ruary 17, 2023	or and assigned			
This amendment is submitted to amend the following	owing:						
A. If amending name, enter the new name of	f the limited liab	ility company her	<u>e</u> :				
N/A							
The new name must be distinguishable and contain the v	words "Limited Liabil	lity Company," the des	ignation "LLC" or the	abbreviation "L.L.C."			
Enter new principal offices address, if applie	cable:						
(Principal office address MUST BE A STREE	ET ADDRESS)	4146 Staghorn Ln, Weston, FL 33331					
Enter new mailing address, if applicable:		4146 Staghorn Ln	ı, Weston, Fl. 33331				
(Mailing address MAY BE A POST OFFICE	<u>ΒΟΧ)</u>						
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office : <u>ss here</u> :	address on our rec	ords, <u>enter the na</u>	me of the new registered			
Name of New Registered Agent:	JD Advisers Group, Co						
New Registered Office Address:	2598 E Sunrise Blvd Office 2104, Suite 2006						
This amendment is submitted to amend the factor of New Registered Agent: N/A The new name must be distinguishable and contain the Enter new principal offices address, if applicable of the new mailing address of applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/of agent and/or the new registered Agent:		Enter Florid	a street address				
	Fort Lauderdale	e	, Florida 33304				
		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(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
AMBR	Mailen Ester Teran Vargas	4146 Staghorn Ln, Weston, FL 33331	■Add
			□Remove
			□Change
AMBR	Francisco Cumplido	4146 Staghorn Ln, Weston, FL 33331	= Add
			□ Remove
			□Change
MGR	Carmen M Escalona	4146 Staghorn Ln, Weston, F1, 33331	□Add
			<u>≡</u> Remove
			□ Change
			🗆 Add
			□Remove
			□ Change
-		<u></u>	□Add
			□Remove
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			□Remove
			□ Change

Effective date, if other than the date of filing: (optional) 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 0.20 (outer: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a occurrent's effective date on the Department of State's records. Tecord 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 is filed. April 2023 Signature of a member or authorized representative of a member							<u>_</u>				<u> </u>	
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Signature of a member or authorized representative of a member							·		_			
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				Sign								

Filing Fee: \$25.00