

L 2 3 0 0 0 1 6 5 2 3 2

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

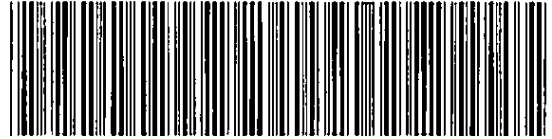
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

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10/10/23--01035--020 **25.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2023 OCT 26 PM 12:00

Y. SCOTT
OCT 26 2023



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 21, 2023

BRENDA BRYANT
908 6TH STREET
DAYTONA BEACH, FL 32117

SUBJECT: 1F SPEED LLC
Ref. Number: L23000165232

We have received your document for 1F SPEED 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):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6053.

Yvette Scott
Supervisor

Letter Number: 223A00024508

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: IF Speed 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:

Brenda Bryant
Name of Person
QuickLink Consulting Services LLC
Firm/Company
908 6th Street
Address
Daytona Beach FL 32117
City/State and Zip Code
schedule.ofperformance@gmail.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Brenda Bryant at 386 676-4444
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

IF Speed 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 04/03/2023 and assigned Florida document number L23000165232.

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1096 N US Highway 1, Unit 108

Ormond Beach FL 32174

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1096 N US Highway 1, Unit 108

Ormond Beach FL 32174

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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

_____, Florida _____

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>	<u>Address</u>	<u>Type of Action</u>
, MGR	Doug Meeker	41 Aspen Street	<input checked="" type="checkbox"/> Add
		Daytona Beach, FL 32124	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
, AP	John McKnight	3120 Diamond Rd	<input checked="" type="checkbox"/> Add
		Titusville FL 32796	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add

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

Multiple horizontal lines for amending information.

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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 Oct 26, 2023

John McKnight
John McKnight; Oct 26, 2023 10:20 EDT
Signature of a member or authorized representative of a member

John McKnight VP, AP
Typed or printed name of signee

Filing Fee: \$25.00