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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

**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 BOOSTED MOTORSPORTS GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu — Corporate Filing Menu

Help



Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOOSTED M	OTORSPORTS GROUP LLC	and A
(A Florid	ity Company as it now appears on our rec a Limited Liability Company)	<u>orus.</u>)
The Articles of Organization for this Limited Liability (Company were filed on <u>08/24/202</u>	and assigned
Florida document number <u>L23000398432</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "L	A.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	·
Enter new mailing address, if applicable:		=
(Mailing address MAY BE A POST OFFICE BOX)		<u>:n</u>
Stating marcs MAT DE A COST WITKE DOWN	100 100 100 100 100 100 100 100 100 100	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>ent</u>	er the name of the new registere
agent and/or the new registered ornice address here.		
Name of New Registered Agent:		
New Registered Office Address:		
	Emer Florida street ado	lress
		Florida
	Cip	Zip Code

New Registered Agent's Signature, it 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.

27/2023 15 44:44 PDT .

To 18506176383

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From: Registered Agents Inc.

Fax. 8134365206

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	John O'Malley	6211 Forestwood Dr E	※ Add
		Lakeland, FL 33811	□Remove
			[]Change
			∐Add
			□Remove
		<u>. </u>	
			□Add
			□Remove
			[]Change
			DAdd
			□Remove
			Change
			□Add
			URemove
			☐ Change
			□Add
			□Remove
			□Change

. If ames	ding any other information, enter change(s) here: (Attach additional sheets, it necessary.)
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(If an offer Note: 1	e date, if other than the date of filing:
ne record ord is file	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 L.
Dated _	September 27 . 2023 .
	Signature of a member or authorized representative of a member
	argument of a member of grantom cyl tepte vitative of a member
	Robin Jones Typed or printed name of signee