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(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:

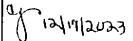




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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJI	Smoky Mot	intain Hot Rods LLC		
SUBJI	ECT:		nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Michael I. Vinyard II		
			Name of Person	
		Smoky Mountain Hot Rod	s LLC	
			Firm/Company	
		854 Fisher Rd		
			Address	
		Ocklawaha, FL 32179		
			City/State and Zip Code	
		smokymountainhotrods23@	gmail.com to be used for future annual report notific	eution)
For for	ther information e	oncerning this matter, please c	·	carlott)
		successing this matter, prease e		
Morga	n Vinyard		352 497-0689 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	se following amount:		
□ \$2	5.00 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**

2023 [10 -4] [11 9: 22

Smoky Mountain Hot Rods LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) ited Liability Company)	·
The Articles of Organization for this Limited Liability Com	pany were filed on November 27, 2023	and assigned
Florida document number L23000475530	10/16/2023	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Smoky Mountain Steel Bodies LLC		
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:	No changes with address.	
Principal office address MUST BE A STREET ADDRES	<u>s</u> ,	33333 <u>.</u>
Enter new mailing address, if applicable:	No changes with address.	
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	fice address on our records, <u>enter the na</u>	me of the new regis
New Registered Office Address:		
	Enter Florida street address	
	. Florida	
	City	Zip Code

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>	Type of Action
			☐Add
			□Remove
			□Change
			_Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			🗀 Add
			□Remove
			□ Change
		□Remove	
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			(F)(*)

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an effe ote:	re date, if other than the date of filing:
reco	and specifies a delayed effective date, but not an effective time, at $12\!:\!01$ a.m. on the earlier cooth day after the record is filed.
ated <u>1</u>	bienter 27. 2023. My J 1/1/1.4.
	Signature of a sember or authorized representative of a member

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Filing Fee: \$25.00