L 23000477695

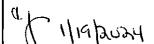
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	Registration S Division of Co			
•	Super Car	Golf Carts, LLC		
SUBJEC	Т:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all corresp	ondence concerning this matter	to the following:	
		Michael McCormick		
			Name of Person	
		The Hachar Law Group		
			Firm/Company	
		7900 Oak Lane, Ste 401		
			Address	
		Miami Lakes, FL 33016		
			City/State and Zip Code	
		michael@hachargroup.com	to be used for future annual report t	
For furthe	er information	e-mail address: concerning this matter, please c		nouncation
Michael	McCormick		305 200-1308 at ()	
	Name	of Person	Area Code Day	time Telephone Number
Enclosed	is a check for t	the following amount:		
≡ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailing Addre</u> Registration		Street Address Registration	
	Division of (Corporations	Division of C	Corporations
	P.O. Box 63. Tallahassee,			of Tallahassee nroe Street, Suite 810

Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2231 128 77:19

SUPER CAR GOLF CARTS, LLC		5025. <u>25.</u> 7. 19
(Name of the Limited	I Liability Company as it now ap A Florida Limited Liability Compa	opears on our records.)
The Articles of Organization for this Limited Lia Florida document number <u>L23000477695</u>	bility Company were filed or	1 10/18/2023 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	the limited liability compan	y here:
The new name must be distinguishable and contain the wor		the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/or reagent and/or the new registered office address		ur records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	Christian Rosado	
New Registered Office Address:	17241 NW 94th Court, APT	<u> </u>
	Enter Hialeah	r Florida street address , Florida 33018
	City	Zip Code
AT IN CO. LA CO. C. CO. C. D.		

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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ii amending Authorized rerson(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>	Name	Address	Type of Action
MGR	ADRIANA COHEN	4651 SW 71st Ave	■Add
		Miami, FL 33015	□Remove
			□Change
		-	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			
			□Remove
			ClChange
			☐ Add
			Remove
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fective	date, if other than the da	e of filing:				(optional)	
n effect	ive date is listed, the date must be the date inserted in this block	specific and ca	innot be prior to	o date of filing or	more than 90 da ing requireme:	iys after filing.) Pi nts. this date wi	arsuant to 605.020 ll not be listed a
cument	's effective date on the Depar	tment of Sta	te's records.	•			
ecord s is filed	pecifies a delayed effective da	te, but not ar	effective tin	ie, at 12:01 a.m	on the earlie	rofi (b) The 9	Oth day after the
ted _	December 12		2023				
			Docu Sage	ned by:			
_							
_	C:	intura of a ma	mbar of attorney	W.W. Tompocontrols	o of a mambar		
_	Sig	nature of a me	mber or author	Zeo Tepresentati	ve of a member		

Filing Fee: \$25.00