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SUBJECT:	X LEADS I					
iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii			ited Liability Company			
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retur	n all correspo	ondence concerning this matter	to the following:			
		ANA CUARA PIMENTA				
			Name of Person			
		ACP BUSINESS USA CO	RP			
		,	Firm Company			
		777 BRICKELL AVE 500	-21			
			Address			
		MIAMI FL 33431				
			City/State and Zip Code		··	
		anaclara@acpbusinessusa.c	om to be used for future annual	icport not	ification)	
For further	information c	oncerning this matter, please c			,	
ANA CLA	RA PIMENTA	A	1	222	6595	
	Name o	f Person	at (<u>467</u>) Area Code		ne Telephone	Number
Enclosed is	a check for th	ne following amount:				
	Filing Fee	☐ \$30.00 Filing Fee &	□ \$55.00 Filing Fee	Æ	□ \$6	0.00 Filing Fee.
		Certificate of Status	Certified Copy (additional copy is end	ertificate of Status & ertified Copy (dditional copy is enclosed)		
Mailing Address: Registration Section			<u>Street A</u> Registr	<u>ddress:</u> ation Se	ection	
D:	ivision of C	Corporations	Divisio	n of Co	rporations	
P	O. Box 632	7	The Ce	ntre of "	Tallahassei	•

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

X LEADS LLC

(Name of the Limited Liability Company as it now appears on our record 2024 OCT -3 AH 8: 35 The Articles of Organization for this Limited Liability Company were filed on $\frac{10'27\ 2023}{10'27\ 2023}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: DAYTONA MOTORS GROUP LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Sio Lee Rd Enter new principal offices address, if applicable: ORLANDO, FL 328 C (Principal office address MUST BE A STREET ADDRESS) 810 Lee Rd Enter new mailing address, if applicable: Orlando, FZ 32810 (Mailing address MAY BE A POST OFFICE BOX) 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 _____ Zip Code Chv

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 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
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			Remove
			\(\sum_\) Change
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fan effective date is listed, the date i	mist be specific and	Cannot be prior	to date of filing	or more than 90	days after I	iling.) Pur	suant to 6	05.020
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Filing Fee: \$25.00