

24000170059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

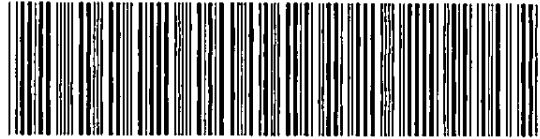
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2024 OCT 22 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2024 OCT 22 AM 10:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 10/22/2024

****WALK IN****

ENTITY NAME Iron Valor Motors, LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$55

ACCOUNT #: I20160000072

E. B. J. M.

Please call Tina at the above number for any issues or concerns. Thank you so much!

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

STEIN TIME MACHINES, 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 APRIL 10, 2024 and assigned
Florida document number L24000170059.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

IRON VALOR MOTORS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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

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

AMBR = Authorized Member

[illegible]

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

[illegible]

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 October 18, 2024

Signed by
Jeremy Stein
23C8D78A332417

Signature of a member or authorized representative of a member

JEREMY STEIN, Manager of Member

Typed or printed name of signee

Filing Fee: \$25.00

Certificate Of Completion

Envelope Id: BB7655656C0D499392F5F463B94643DB
Subject: Complete with DocuSign: Arts of Org-1Amd-STM LLC-IVM LLC-2024-scanned.pdf
Source Envelope:
Document Pages: 3 Signatures: 1
Certificate Pages: 4 Initials: 0
AutoNav: Enabled
EnvelopeId Stamping: Enabled
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Status: Completed

Envelope Originator:
Heather Stephens
One Liberty Place, 1650 Market Street, Suite 2800
Philadelphia, PA 19103
HStephens@cozen.com
IP Address: 50.73.137.1

Record Tracking

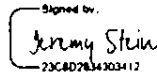
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HStephens@cozen.com

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Signer Events

Jeremy Stein
jeremy@steintimellc.com
Manager
Security Level: Email, Account Authentication
(None)

Signature

Signed by:

23C407B343034112

Signature Adoption: Pre-selected Style
Using IP Address: 104.179.107.222

Timestamp

Sent: 10/21/2024 1:52:02 PM
Viewed: 10/21/2024 1:55:37 PM
Signed: 10/21/2024 1:56:01 PM

Electronic Record and Signature Disclosure:
Accepted: 10/21/2024 1:55:37 PM
ID: aeaad907-be27-4bc7-b149-630569a483e1

In Person Signer Events**Signature****Timestamp****Editor Delivery Events****Status****Timestamp****Agent Delivery Events****Status****Timestamp****Intermediary Delivery Events****Status****Timestamp****Certified Delivery Events****Status****Timestamp****Carbon Copy Events****Status****Timestamp****Witness Events****Signature****Timestamp****Notary Events****Signature****Timestamp****Envelope Summary Events****Status****Timestamps**

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Payment Events**Status****Timestamps****Electronic Record and Signature Disclosure**