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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	VISIO	N MOTORSPOR	RTS, INC.			
DOCUMENT NUMBER:		P0800005021	4			
The enclosed Articles of Amena	<i>lment</i> and fee are sul	omitted for filing.				
Please return all correspondence concerning this matter to the following:						
	TRACY J HOLLIDAY					
	Name of Contact Person					
	Firm/ Company					
1120 BALLYSHANNON PKWY						
	Address ODLANDO FLORIDA 20007					
 	ORLANDO, FLORIDA 32807 City/ State and Zip Code					
	,					
E-ma		paseo84@aol.co				
For further information concerning this matter, please call: TRACY J HOLLIDAY at (321), 662-2248						
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check for the follo	wing amount made p	payable to the Florida Depa	artment of State:			
	3.75 Filing Fee & rtificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment to Articles of Incorporation of

VISION MOTORSPORTS, INC.			
(Name of Corporation as currently filed with the I	Florida Dept. of State)	- ປູ	
P08000050214		ŗ	
(Document Number of Corporation (if known)	-	
Pursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	Florida Profit Corporation adopts the followin	g ame	
. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or " word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must	_The bbrevi contai	
3. Enter new principal office address, if applicable:	2500 FORSYTH ROAD D13		
Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FLORIDA 32807	-	
		-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2500 FORSYTH ROAD D13		
(A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	ORLANDO, FLORIDA 32807	_	
		_	
If amending the registered agent and/or registered office add new registered agent and/or the new registered office address			
Name of New Registered Agent TRACY J HOLL			
· · · · · · · · · · · · · · · · · · ·	HANNON PKWY		
(Florida st	cer address,		
(Florida st. New Registered Office Address:	, Florida 32828		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	TRACY J HOLLIDAY	1120 BALLYSHANNON PKWY
X Add			ORLANDO, FLORIDA 32828
Remove			Fray J. Hay hard
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
If an amendment provides for an excl	change, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendment(s) adoption: U8/U8/2U13	_, if other than the
date this document was signed. Effective date if applicable: 08/08/2013	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 08/08/2013	
Signature Trace J. Harring	_
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a feceiver, trustee, or other court appointed fiduciary by that fiduciary)	
TRACY J HOLLIDAY	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	_