| (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: |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
| Office Use Only                         |  |  |



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06/08/09--01039--002 \*\*52.50



## **COVER LETTER**

| TO: Amendment So                       |  |  |  |
|--|--|--|--|
| NAME OF CORP                           | ORATION: H.P                                 | Motorsport "I  | NC"  |
| DOCUMENT NUM                           | MBER: <u>P0900</u>                           | 0037335  |  |
| The enclosed Articl                    | es of Amendment and fee a                    | re submitted for filing.   |  |
| Please return all cor                  | respondence concerning this                  | s matter to the following:                                       |  |
| ``.,                                   | Mathew. C                                    | Hutchin 5 ame of Contact Person                                  |  |
| · <del>.</del>                         | H.P Motors                                   | Firm/ Company  |  |
|  | 4770 110th                                   | Ave N  |  |
|  |  | Address  | •  |
| _                                      | Clearwater, Fr                               | 1 33762  |  |
|  | l Ci   | ty/ State and Zip Code   |  |
|  | M221totch: E-mail address: (to be used       | of for future annual report notification)                        | 1  |
| For further informat                   | ion concerning this matter, p                | please call:   |  |
| Matthe                                 | W Hutchins<br>f Contact Person               | at ( 727) 424  Area Code & Daytime Telep                         | hone Number  |
| Enclosed is a check                    | for the following amount m                   | ade payable to the Florida Departm                               | ent of State:  |
| ☐ \$35 Filing Fee                      | □ \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address                        |  | Street Address   |  |
| Amendment Section                      |  | Amendment Section  |  |
| Division of Corporations P.O. Box 6327 |  | Division of Corporations<br>Clifton Building                     |  |
| Tallahassee, FL 32314                  |  | 2661 Executive Center Circle                                     |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of INC INC INCORPORT INC INCORPORT INC INCORPORT INC INCORPORT IN

A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) UNIT 6 Clearwater, C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Floridg/street address) \_, Florida\_ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

| removed and  | the Officers and/or Directors, enter the title, name, and address of each Office onal sheets, if necessary) |                                    | rector being                           |
|--------------|---|------------------------------------|--|
| <u>Title</u> | Name  | Address                            | Type of Action                         |
| · P          | Matthew CHutchins   | 5980 102nd Ave N                   | Add                                    |
|              | 1   | Pinellas Park, FL 3378             | 2                                      |
| Secretary    | Matthew C Hutchins  | 5980 1012 Aug N                    | Add                                    |
| 0            |   | Pinellas Park, FC 33782            |  |
| 1_           | Andia E Aersud  | 12062 67 Lane N<br>12190, FL 33773 | Add Remove                             |
| (attach addi | ng or adding additional Articles, enter itional sheets, if necessary). (Be specif                           | îc)                                |  |
| Articl       | e III : CAR Dec   | aler/Mechanical                    | ······································ |
| Δ c.L \a 10  | e IV: Number of   | E class 2                          | ····                                   |
| AITIC        | e IV . Mombes on  | shales 3                           | · · · · · · · · · · · · · · · · · · ·  |
|              |   |                                    |  |
|              |   |                                    |  |
| provisions   | ndment provides for an exchange, recles for implementing the amendment if a applicable, indicate N/A)       |                                    |  |
|              |   |                                    |  |
|              | - A M   | 4                                  |  |
|              |   |                                    | <del></del>                            |
| g.           |   |                                    |  |
|              | 1   |                                    |  |

| The date of each amendment                             | s) adoption: 6/6/09   |
|--|---|
| . Effective date <u>if applicable</u> :                | 617109 (date of adoption is required)   |
| <u></u>  | (no more than 90 days after amendment file date)  |
|  |   |
| Adoption of Amendment(s)                               | ( <u>CHECK ONE</u> )  |
| The amendment(s) was/wer<br>by the shareholders was/we | e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.  |
|  | e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):              |
| "The number of votes                                   | east for the amendment(s) was/were sufficient for approval  |
| by   | (voting group)  |
|  | (voting group)  |
| The amendment(s) was/wer action was not required.      | e adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/wer action was not required.      | e adopted by the incorporators without shareholder action and shareholder   |
| Dated  | 616/09  |
|  | a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court |
|  | ointed fiduciary by that fiduciary)   |
|  | Mathew C Hutchins (Typed or printed name of person signing)   |
|  | A   |
|  | (Title of person signing)   |