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TO: Amendment Section

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Division of Corporations NAME OF CORPORATION: \_\_\_\_\_ One One Motorsports Inc DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Daniel Wilkinson Name of Contact Person Nine One One Motorsports Inc Firm/ Company 1784 Cherry Laurel Drive Address Ormond Beach FL 32174 City/ State and Zip Code dwilkinson25@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 386 ) 795-6589

Area Code & Daytime Telephone Number Daniel Wilkinson Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** 

Amendment Section

P.O. Box 6327

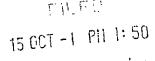
Division of Corporations

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



Nine One One Motorsports Inc (Name of Corporation as currently filed with the Florida Dept. of State) P13000022206 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: 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 ) 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 of fice address: Name of New Registered Agent (Florida street address) New Registered Office Address: \_ . Florida (City) 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

## 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	PT	John Doe		
X Remove	<u>v</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	P	Garry Wilkinson	1784 Cherry Laurel Drive	
Add			Ormond Beach FL 32174	
X Remove			-	
2) X Change	P	Daniel S Wilkinson	1784 Cherry Laurel DRive	
Add			Ormond Beach FL 32174	
Remove				
3 ) Change				
Add				
Remove				_
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add			,	_
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f an amendment provides for an exchai	nge reclassificat	ion, or cance	ellation of issu	ed shares.	
provisions for implementing the amend	dment if not cont	tained in the	amendment i	tself:	
(if not applicable, indicate N/A)					
					<u> </u>
				<del></del>	····

The date of each amendmen		, if other than the
date this document was signed Effective date if applicable:	September 25, 2015	
pricetive date in applicable.	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendment(s) rere sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Septe Dated	ember 25, 2015	
Signature_	Dawyfffffman	
. (	By a director president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Daniel S Wilkinson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	