P98000071334

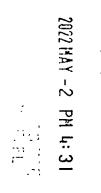
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C. BRUMBLEY
JUN 2 3 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: ERNIE BELLO M	OTORSPORT, INC.	
	1BER: P98000071334		<u></u>
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cort	respondence concerning this ma	tter to the following:	
	MARTIN V. KATZ, ESQ		
		Name of Contact Person	1
	KATZ & DOORAKIAN LA	W FIRM, P.L	
		Firm/ Company	
	625 N. FLAGLER DRIVE. S	SUITE 605	
		Address	· · ·
	WEST PALM BEACH, FL 3	3401	
		City/ State and Zip Cod	С
	MKATZ@KATZLAWPL.C	OM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, plea	se call:	
MARTIN V. KATZ	, ESQ	at (561	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ai Di P.	ailing Address nendment Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

171)	SHILL	1217	LO MOTORSPORT	INIC
11. K	NIII:	15151	LO MULIORNIURI	DOL.

(<u>Name</u>	of Corporation as current	ly filed with the Florida Dept. of State)
P98000071334		
·····	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
		The new
	Corp," "Inc," or "Co".	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "
B. Enter new principal office address,	if applicable:	625 N. FLAGLER DRIVE, SUITE 605
(Principal office address MUST BE A.S.		WEST PALM BEACH, FL 33401
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. BOX 328, Jupiter, FL 33468 . 22
D. If amending the registered agent a	nd/or revistered office add	Iress in Florida, enter the name of the 12
new registered agent and/or the ne		
Name of New Registered Agent	MARTIN V. KATZ, ESÇ)
	625 N. FLAGLER DRIV	E, SUITE 605
	(Florida si	reet address)
New Registered Office Address:	WEST PALM BEACH	. Florida 33401
		(City) (Zip Code)
New Registered Agent's Signature, if a I hereby accept the appointment as regis		t <u>:</u> with and accept the obligations of the position.
	1	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

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		_	
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	nending or adding additional A ch additional sheets, if necessary,). (Be specific)			
		<u> </u>			
					-
				<u></u>	
					<u> </u>
					
—-					
I f a r		uhana walawiGa	stian on annoullat	ing of insued shows	
pro	n amendment provides for an ex evisions for implementing the ar	nendment if not cor	ntained in the am	endment itself:	<u>5,</u>
	(if not applicable, indicate N/A)				
				-	
					

The date of each amendment(s) adopt	ion:	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirent of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for ent for approval.	the amendment(s)
	ed by the shareholders through voting groups. The job voting group entitled to vote separately on the amount	
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected, by	or, president or other officer – if directors or officer an incorporator – if in the hands of a receiver, trust	s have not been tee, or other court
appointed to	duciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	