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CIVISION OF CORPORATIONS

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J. BRYAN AUG 1-6 2006

## **COVER LETTER**

TO: Registration Section Division of Corporations	•	
SUBJECT: MOTOYSDO(TS OF (Name of Limited)	Ft. Lauderdale, LLC Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Asnley Riley (Name of Person)  Motor Sports Inv. Group (Firm/Company)  801 South Olive Ave # 216 (Address)  West Palm Beach, Fl (City/State and Zip Code)		
For further information concerning this matter, plea	se call:	
AShley Riley at (at (	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is:	torSports of Ft.	<u>Lauderdale</u> ,uc
2. The mailing address of the limited liability company is	: 801 S. Dlive Ave	+216.
West ?	alm Beach, FL	3340
10/11/03	L0300002114	15
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registered off Florida Department of State:	ice address as shown on the reco	rds of the
Name		0.1
1999 N. Heae	<u>ral Highway</u> , Ste. 10	01
Boca Katon, City, State and	FL 33187	an and an
6. The name and address of the new registered agent and/	,	NVISH NVISH
Rodin Your	18551	ECRETAR SION OF C
801 Salum Name	A1/2 #216	CORPORED S
Florida street address (P.O. Bo	77 10 0	STAT ORAT
West Palm Beach FL 3	3401	OH FORES
City, State and	Zip	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company	Florida street address of the regis ntical. Or, in the case of a Florida s) was/were authorized by an affi erwise provided in the articles of	stered office a limited irmative vote
(Signature of a member or authorized representative of a member)	_	
Printed or typed name of signee)	_	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the plant of am familiar with and accept the obligations of my performent to the plant of the companies of the compa	agree to act in this capacity. I firoper and complete performance osition as registered agent as preerly reflect a change in the reginy has been notified in writing of	orther agree to of my duties, ovided for in stered office this change.
(Signature of Registered Agent)	200 M H I I I I I I I I I I I I I I I I I I	
Division of Corporations, P.O. Box 6 FILING FEE: 9		i

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