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To: Division of Corporations
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SECRETARY OF STATE
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LIMITED LIABILITY REINSTATEMENT

USA SPEEDWAY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$250.00

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LIMITED LIABILITY COMPANY REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L04000048685					
1. Limited Liability Company's Name usa speedway, llc					
2. Principal Office Address - No P.O. Box # 6810 n. orange blossom trail			3. Mailing Office Address 7421 lake willis dr		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State orlando, fl			City & State orlando, fl		
Zip 32810	Country orange	Zip 32821	Country orange	4. State of Formation florida	
5. Date Organized or Qualified To Do Business in Florida 06/29/2004				6. Filing Number 201307745	
7. CERTIFICATE OF STATUS DESIRED ☐				Applied For Not Applicable	
8. Name and Address of Current Registered Agent Hang tran Street Address (P.O. Box Numbers Not Acceptable) 7420 lake willis dr Suite, Apt. #, Etc. City orlando State FL Zip Code 32821					
9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 606, F.S. Signature of Registered Agent <u><i>Hang tran</i></u> Date 8-8-2007 REGISTERED AGENT MUST SIGN					
10. Names and Street Addresses of Managing Members/Managers					
Title	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager		City / State / Zip	
MEMR	hai lam	7420 lake will dr		orlando, fl 32821	
MEMR	hang tran	7420 lake will dr		orlando, fl 32821	
REINSTATEMENT 2005-2007					
11. I certify that I am managing member/manager or the member or trustee empowered to execute this application as provided for in chapter 606, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been retracted, the limited liability company name satisfies the requirements of section 606.004, F.S., and that all fees owed by this limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
Signature of Managing Member/Manager <u><i>Hang tran</i></u>		Date 8-8-2007		Daytime Phone# (407)580-5307	
Typed or printed name of signing Managing Member/Manager Hang Tran					

CR2EDM1 (1/07)

State of Formation

Date Organized or Qualified To Do Business in Florida

Filing Number

CERTIFICATE OF STATUS DESIRED

☐ A \$100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$100 reinstatement be waived.

10. Names and Street Addresses of Managing Members/Managers

Title	Name of Managing Member/Manager	Street Address of Each Managing Member/Manager	City / State / Zip
MEMR	hai lam	7420 lake will dr	orlando, fl 32821
MEMR	hang tran	7420 lake will dr	orlando, fl 32821

REINSTATEMENT 2005-2007

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Signature of Managing Member/Manager *Hang tran* Date **8-8-2007** Daytime Phone# **(407)580-5307**

Typed or printed name of signing Managing Member/Manager **Hang Tran**