L07000005933

(Requestor's Name)							
(Address)							
(Address)							
_							
_							
(Document Number)							
-							
Special Instructions to Filing Officer:							

Office Use Only



000187863430

11/22/10--01022--005 **25.00

10 NOV 22 PH 1: 38
SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

NOV 23 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	S					
	•				\		
SUB	JECT:	Morse M					
		Name of Limite	d Liabi	lity (Company		
Dear	Sir or Madam:						·
The e	enclosed Registered Agent/	Registered Office	Change	e and	fee(s) are submitted for	filing.	
Pleas	e return all correspondence	concerning this m	atter to	the	following:		
	Dean M	orse					
	Name of Per	son					
	Morse MotorS		<u></u> _			~~! 	
	Firm/Compa	ny				10 NOV 22 PM 1: 30 SECRETARY OF STATE FALLAHASSEE, FLORIDI	esergically.
	•					空	
	10205 Old Ta	ımpa Rd				ASS 22	ينتنز
	Address					A A	, [
						OF STATE, FLORI	
	Parrish, FL	34219				107	
	City/State and Zi			_		ASS.	Ď

E	-mail address: (to be used for future	annual report notification	on)	_			
For fi	urther information concerni	ng this matter, ple	ase cal	l:			
	Dean Morse	at (941	_)_	7253265		
•	Name of Person			Area (Code & Daytime Telephone Num	iber	
	STREET/COURIER ADI	DRESS:	MA	AILIN	NG ADDRESS:		
	Registration Section		Re	gistra	tion Section		
	Division of Corporations				of Corporations		
	Clifton Building	_			k 6327		
	2661 Executive Center Circ	:le	Tal	lahas	see, Florida 32314		
	Tallahassee, Florida 32301						
	Enclosed is a check for	the following amo	ount:				
	\$25 Filing Fee		□\$5	5 Fil	ling Fee & Certified Cop	y	

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.

Name of the limited liability company:	Morse MotorSports LLC						
2. (a) Principal office address of limited liability compan	y: 10205 Old Tampa Rd						
(Note: MUST BE STREET ADDRESS)	Parrish, FL 34219						
(b) Mailing address of limited liability company:	Morse MotorSports LLC						
(Note: MAY BE POST OFFICE BOX)	10205 Old Tampa Rd Parrish, FL 364219						
01/16/2007	L0700005933						
3. Date of filing/registration in Florida	4. Document number						
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:						
Registered Agent:	William Bennett						
Registered Office Address:	10205 Old Tampa Rd						
	Parrish, FL 34219						
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address of							
<u>NEW</u> Registered Agent:	Dean Morse						
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10205 Old Tampa Rd						
·	Parrish ,FL34217						
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office						
Signature of a member or authorized representative of a member							
Dean Morse Printed or typed name of signee							
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, thereby confirm that the limited liability company	igree to act in this capacity. I further agree to oper and complete performance of my duties, sistion as registered agent as provided for in trely reflect a change in the registered office y has been notified in writing of this change.						