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SECRETARY OF STATE

GEORGE M. SANTAMARINA, P.A. LAW OFFICES 7175 SW 8th Street, Suite 204 Miami, Florida 33144

Tel: 305-261-4683 Fax: 305-262-7566

November 5, 2007

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: MIAMI KARTING EVENTS, LLC

Dear Sir/Madam:

Attached please find Statement of Change of Registered Agent of the above-referred company along with a check in the amount of \$25.00 for filing thereof.

Sincerely,

GEORGE M. SANTAMARINA, P.A.

George M. Santamarina

/ss

Encl(s).

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: MIAMI KARTING	EVENTS, LLC
2. The mailing address of the limited liability company is:	N 132 STREET,
BAY J, OPALOGRA, FL 33054	
	200 /03089 number
3. Date of filing/registration in Florida 4. Document	number
5. The name of the registered agent and the registered office address as show Florida Department of State:	wn on the records of the
UNITED STATES CORPORATION AGAIN Name 320 S FLAMINGO ROAD, #347 Address PEMBROKE PINOS, FL 33027 City, State and Zip	175, WC.
320 S FLAMINGO ROAD, #347 Address	O7 N
PEHBROKE FINOS, FL 33027 City, State and Zip	SECRETARY OF STATALLAHASSEE FLOR
6. The name and address of the new registered agent and/or office:	B PR
Name 3990 NW 13251LEET, BAYJ Florida street address (P.O. Box NOT acceptable)	PM 12: 11 RY OF STATE SEE FLORIDA
Name	E I
Florida street address (P.O. Box NOT acceptable	_ Sr'
•	,
OPALOCIE A FL 33054 City, State and Zip	<u> </u>
If the limited liability company is not organized under the laws of the State confirmed that after the change or changes are made, the Florida street addrand the business office of the registered agent will be identical. Or, in the cliability company, it is hereby confirmed that the change(s) was/were autho of the members of the limited liability company or as otherwise provided in or the operating agreement of the limited liability company.	of Florida, it is hereby ress of the registered office rase of a Florida limited rized by an affirmative vote rithe articles of organization
(Signature of a member or authorized representative of a member)	
ALDO CORE	
(Printed or typed name of signee)	1.0
I hereby accept the appointment as registered agent and agree to act in this comply with the provisions of all statutes relative to the proper and complete and flam familiar with and accept the obligations of my position as register Chapter 608 F.S. Or if this accument is being filed to merely reflect a chapter so, thereby confirm that the limited liability company has been notified.	s capacity. I further agree to te performance of my duties, sed agent as provided for in inge in the registered office ed in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00