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EXAMINER

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SEGRETARY OF SIMILE

COVER LETTER

Division of Cor	porations	٠.,	er.
SUBJECT:	KEY WEST	SPEEDWAY LLC	
SOBJECT:		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
		a. a	
		Stephen Semran Name of Person	
		- Firm/Company	,
	:	2922 Flagler Avenue	
		Address	
		Key West, FL 33040	
		City/State and Zip Code	
	E-mail address: (n761999@vahoo.com to be used for future annual report notifica	tion)
For further information c	concerning this matter, please of	eall:	
Gr	ogory Dovilo	20E \ 2	93-8554
Name o	egory Davila f Person	at (305) 2 Area Code & Daytime 7	
			•
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	\$30,00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ING ADDRESS:	STREET/COURIE	R ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

KEY WEST SPEEDWAY LLC

RESIGNATION OF MANAGER

I, DAVID CARTER, hereby voluntarily resign as Manager of KEY WEST SPEEDWAY LLC.

Signed this 13th day of September, 2010.

DAVID CARTER

Sworn to + Subscribed BEFORE THIS 13th Day OF SEPTEMBER, 2010 By DAVID CARTER WHO PRODUCED A FLOL C- 636-165-32-188-0

HEIDI DAVILA NOTARY-FLORIDA MINISTRA POBESITA PO

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limiter	Y WEST SP	EEDWAY LLC	n our records)			
(Name of the Emilier	A Florida Limited I	ny as it now appears o Liability Company)	irour records.			
The Articles of Organization for this Limited L	iability Company	were filed on	4/30/2008	_ and assi	igned	
Florida document numberL0800004	3381					
This amendment is submitted to amend the following	lowing:					
A. If amending name, enter the new name of	of the limited liab	ility company here:				
The new name must be distinguishable and end wi "L.L.C."	ith the words "Limi	ited Liability Company,	" the designation "LL	C" or the a	bbreviation	
Enter new principal offices address, if applicable:		218 WHITEHEAD STREET #5				
(Principal office address MUST BE A STREE	ET ADDRESS)	KEY WEST, FL:	33040			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2922 FLAGLER AVENUE				
		KEY WEST, FL 33040				
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	STEPHENS	E: SEMRAN LER AVENUE	records, enter the	name o	f the nev	
		City	Florida Siret and Service and	33040 Zip Code	5 : .	
New Registered Agent's Signature, if changing	Registered Agent:					
I hereby accept the appointment as register the provisions of all statutes relative to the accept the obligations of my position as reg being filed to merely reflect a change in the	proper and comp istered agent as	olete performance of provided for in Chap	my duties, and I am oter 608, F.S. Or, if	i familiar this docu	with and Iment is	

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR_	DAVID CARTER	3845 RANEY ROAD TITUSVILLE FL 32780 US	Add Remove		
MGR	STEPHEN SEMRAN	2922 FLAGLER AVENUE KEY WEST FL 33040	✓ Add Remove		
MGR_	CRYSTAL A. RODRIGUEZ	2922 FLAGLER AVENUE KEY WEST FL 33040	✓ Add Remove		
			Add Remove		
			Add Remove		
	·		Add Remove		
D. If amendin	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
<u> </u>			 ,		
Dated	SEPTEMBER , 201	n. Sept	- - - -		
-	•	r authorized representative of a member			
_	STEPHEN SEMBAN Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00