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EXAMINER



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SECRETARY OF STATE

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: URANGE LOUNTY MATOR SPORTS, LLC Name of Limited Liability Company			
Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Jonathan Levy Name of Person			
Name of Person			
ORANGE COUNTY MOTOR SPORT, LLL Firm/Company			
PO Box 781927 Address			
OR LANDO FL 32878-1927 City/State and Zip Code			
Gonlevy Egmail. Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Tarather Lay at (954) 534-2059 Name of Person Area-Gode & 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 & 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. Name of the limited liability company:	COUNTY MOTORSPORTS, ZLC
2. (a) Principal office address of limited liability company	: 2555 N. FORSYTHRD STEA
(Note: MUST BE STREET ADDRESS)	ORLANDO, FL 32807
(b) Mailing address of limited liability company:	PO BOX 781927
(Note: MAY BE POST OFFICE BOX)	ORLANDO, FL 32878
January 8 2009 3. Date of filing registration in Florida	L09000002462 4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	Jonathan Levy
Registered Office Address:	ORLANDO, FL 3280+
(MUST BE FLORIDA STREET ADDRESS)	Jonathan Levy 2591 N. FORSYTH RD Stett D ORLANDO, FL 32807 ,FL
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of premiser or authorized representative of a member Torum 2 my Printed or typed name of signee I hereby accept the appointment as registered agent and agreement with the provisions of all statutes relative to the pro	SPH CRAPES AND STAR TO
comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 608/F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	per and complete perjormance of fly duties, lition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent	
Division of Corporations, P.O. Box 632 FILING FEE: \$2	