

LD910000016108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

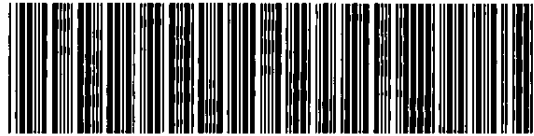
Special Instructions to Filing Officer:

**L. SELLERS**

MAY 19 2009

**EXAMINER**

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09 MAY 18 AM 8:23  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Warning Track Sports, LLC  
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:

Rick Wilkins  
Name of Person

Warning Track Sports, LLC  
Firm/Company

120 Kingfisher Drive  
Address

Ponte Vedra Beach, FL 32092  
City/State and Zip Code

ctchwilk@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rick Wilkins at ( 904 ) 859-2504  
Name of Person Area Code & 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

\$55 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: Warning Track Sports, LLC

2. (a) Principal office address of limited liability company: 450-106 SR 13 North

(Note: **MUST BE STREET ADDRESS**) Suite 119  
St. Johns, Florida 32259

(b) Mailing address of limited liability company: 450-106 SR 13 North

(Note: **MAY BE POST OFFICE BOX**) Suite 119  
St. Johns, Florida 32259

February 17, 2009  
3. Date of filing/registration in Florida

L09000016108  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Robert J. Leonard

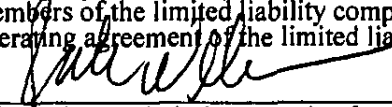
Registered Office Address: 450-106 SR 13 North  
Suite 119  
St. Johns, Florida 32259

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** Rick Wilkins


**NEW Registered Office Address:** 120 KINGFISHER  
**(MUST BE FLORIDA STREET ADDRESS)** PO BOX 804 BCHA, FL 32082

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
Signature of a member or authorized representative of a member

Rick Wilkins  
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

  
Signature of Registered Agent

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

FILED  
MAY 18 AM 8:  
SECRETARY OF STATE  
TALLAHASSEE FL