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C. LEWIS

MAY B 1 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: REINHARDT'S Motorcycles, 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:
FRANK H. KERNET III, ESQ. Name of Person
TARACKS GOMEZ + RICKMAN, PA
3210 U. CYPRESS ST
TAMPA FL 33607 City/State and Zip Code
FKERNET @ THEADVOCATE FOR YOU. COME-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
FRANK KERNET at (813) 951 8278
Name of Person / Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301
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.

agent, or both, in the state of Prortaa.	
1. Name of the limited liability company: REWLIART'S MOTOR CYCLES, LLC	
2. (a) Principal office address of limited liability company: REINHARDT GOETT	
(Note: MUST BE STREET ADDRESS) /635 DALE MABRY HUY STE	1
(b) Mailing address of limited liability company: REWHARDT GOETZ	
(Note: MAY BE POST OFFICE BOX) 1635 DALE MARRY HWY STE	1
3-30-2009 10900030808	
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: UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS BLVD.	
Registered Office Address: A-100 TAMPA, FL 33612 US	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : NEW Registered Agent: FRANK H KERNET BO	
NEW Registered Office Address: 3210 W (YPRESS ST (MUST BE FLORIDA STREET ADDRESS)	
TAMPA ,FL 33607	
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 article of organization or the operating agreement of the limited liability company. Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. Further agree to comply with the provisions of all statutes relative to the proper and complete performance of migliuties, 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