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COVER LETTER

COVE	KLEIIEK	
TO: Registration Section Division of Corporations		
SUBJECT: Performance Pace Solutions 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:		
Mike Electermance accesolations.	Ste. 1000 Ste. 1000	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:		
Mike Kenne at (Name of Person STREET/COURIER ADDRESS: Registration Section	Area Code & Daytime Telephone Number MAILING ADDRESS: Registration Section	
Division of Corporations Clifton Building 2661 Executive Center Circle	Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301 Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
M 323 Filling Fee	\$55 Fining 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.

Name of the limited liability company: Perfe	ormance Race Solutions LLC
2. (a) Principal office address of limited liability company	y: 4150 Saint Johns Parkway
(Note: MUST BE STREET ADDRESS)	Sanford, Fl. 32771
(b) Mailing address of limited liability company:	4150 Saint Johns Parkway
(Note: MAY BE POST OFFICE BOX)	Santord, FL. 327/1
12/11/2009	L09000118324
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:	DIAZ, REUS & TARG LLP
Registered Office Address:	121 SOUTH ORANGE AVE
,	SUITE 1270 ST. 10
	URLANDO FL 32801 US
(b) Enter name of NEW Registered Agent and/or NE	m-<
(b) Enter name of IVEW Registered Agent and/or IVE	7) 3
NEW Registered Agent:	Michael Kanne Kanne
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Performance Race Solutions 4150 Saint Johns Parkway Suite 1000 Sanford ,FL32771
	Sanioro ,rL32771
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization
Signature of a member or authorized representative of a member	·
Mike Keene Keane	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my per Chapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability compar	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.

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

INHS18 (05/08)