## 44000031528

(Requestor's Name)							
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(Business Entity Name)							
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SLUGGIANY OF STATE
TALLAHASSEE FLORIDA

J. HARRIS

## **COVER LETTER**

_	istration Section sion of Corporations						
SUBJECT:	Brad's Karts & Parts, LLC						
	Name of Limited Liability Company						
Dear Sir or N	Madam:						
The enclosed	d Registered Agent/Registered Of	fice Change and fo	ee(s) are submitted for filing.				
Please return	n all correspondence concerning th	nis matter to the fo	ollowing:				
Bradley K	. Farmer						
	Name of Person		_				
Brad's Kai	rts & Parts, LLC						
	Firm/Company		_				
5625 Vern	na Blvd. #13		_				
	Address		-				
Jacksonvi	lle, Florida 32205						
	City/State and Zip Code		_				
bhcool@b	ellsouth.net						
E-mail	address: (to be used for future an	nual report notific	ation)				
For further is	nformation concerning this matter	, please call:					
Bradley K.	. Farmer	904 at (	786-1207				
	Name of Person		Area Code & Daytime Telephone Number				
Regi Divi Clift 2661	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:							
<b>2</b> \$2	25 Filing Fee	<b>\$55</b>	Filing Fee & Certified Copy				

INHS18 (2/14)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company: Brad's Karts &	k Parts	, LLC	
2.	(a)	580 Ellis Road South	(b) 580 Ellis Road South		
	()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ '		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 117		Suite 11	7
		Jacksonville, Florida 32254	_ _	Jackson	ville, Florida 32254
		02-25-2014		L1400003	1528
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Bradley K. Farmer			
-,	(-)	Registered Agent and Registered Office shown on the records of the	he Florid	a Dept. of State	:
		580 Ellis Road South			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES.	<u>\$)</u>	
		Suite 117			≕ na
		Jacksonville , FL	32254		SCCRET ARA
	(b)	Bradley K. Farmer			SS SS
Enter name of NEW Registered Agent and/or NEW Registered Office address:					
		5625 Verna Blvd.			58 <b>%</b> 💯
		NEW Registered Office Address:			ਉਨੀ <b>ਡ</b>
		#13			
		Jacksonville , FL	32205	<b>;</b>	
the age was the	e cha ent v is/we arti signa herei	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law ture of a member of authorized representative of a member on a complete in the proper and complete in the proper and complete in the registered agent as provided by reflect a change in the registered office address, I have a change in the registered of the control of the law in the registered of the law in the registered of the law in the registered of the law in the law	the regional the region of the limited  Brace to accept the accept t	stered office ompany, it is nited liability liability com adley K. Fa	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  Printed or typed name of signee  active. I further garee to comply with the
		in writing of this change.	<i>009</i> 0	S. 9	