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K. SALY EXAMINER

SEP - 6

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: MOTERSPERT DYNAMICS INTERNATIONAL						
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:						
BRETT OSTROW						
Name of Person						
MOTORSPORT DYNAMICS INTERNATIONAL Firm/Company						
1441 SW 30TH AVE #27						
Address						
POMPANO BEACH, FL 33069						
City/State and Zip Code						
BRETT QUSMDI. COM						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
BRETT OSTROW at 954, 258-2700						
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						

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.

I. Nai	me of the limited liability company: MOTORSPORT	- DYNAMICS	NTER	VATIONAL		
2. (a) _	Principal office address of limited liability company:	(b) <u>1441</u>	SW	30TH ress of limited I	AVE	#37 mpany:
	(Note: MUST BE STREET ADDRESS)		_	AY BE POST	-	
	POMPANO BEACH, FL 33069	Pompan	N BE	JACH, FL	<u> </u>	66A
	O6/08/2015 Date of filing/registration in Florida	<u>L150</u>	jøøø9	18767		
3.	Date of filing/registration in Florida	4.	Docume	nt number		
5. (a)	BRETT OSTROW					
	Registered Agent and Registered Office shown on the records of the	e Florida Dept. of Stat	- e:			
	908R N.E. 4TH ANG					
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)	_			
	FT. LANDERDALE ,FL	2 3304	-	FALLA	2016 SEI	"Ti
(b)	BRETT OSTROW		_	ASS.	1	
(/ -	Enter name of NEW Registered Agent and/or NEW Registered O	Office address:		SET		
	1441 SW 30TH AVE 7	#27	_	OF STA	AM D:	(m)
	NEW Registered Office Address:				130	
			_			
	POMPANO BEACH ,FL	33069	_			
If the li	mited liability company is not organized under the laws	s of the State of Fl	orida. it is	hereby conf	irmed th	at after
the chai	age or changes are made, the Florida street address of the	he registered offic	e and the l	business offi	ce of the	registered
agent w was/we	ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of	the limited liabilit	s nereby c y compan	y or as other	u the ch wise pro	ange(s) vided in
the artic	cles of organization or the operating agreement of the li	mited liability cor	npany.	_	•	
	PS -	Be		OSTRO		
•	ure of a member or authorized representative of a member			typed name of	·	
provision the obli to mere	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided ly reflect a change in the registered office address, I he in writing of this change.	e to act in this cap erformance of my for in Chapter 60: ereby confirm that	acity. I fi duties, an 5, F.S. Or the limite	irther agree d I am famili , if this docu d liability co	to compliar with ment is i mpany h	ly with the and accept being filed as been
Signatur	e of Registerod Agent					