## L15000148526

(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					

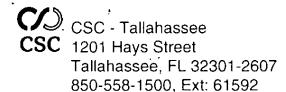
Office Use Only



700420786117

2024 JAN 18 AM 1

RECEIVED 2024 JAN 18 PH 3: 21



To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 01/18/24 Order #: 1388589-9

Re: Autobahn Indoor Speedway Palisades, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed-please-find:

Application for Certificate of Authority change of Agent

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:

I2000000195 Authorization:

Please take the following action: File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## 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. N	ame of the limited liability company: Autobahn Indo	or Spec	edway Palis	sades, LLC
2. (a)			(b)	
,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		· /	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	17631 Nathans Drive		17631	Nathans Drive
	TAMPA, FL 33647		TAMP	A, FL 33647
	8/31/2015		L150001	148526
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
). (a) 	Registered Agent and Registered Office shown on the records of	of the Flo	rida Dept. of S	State:
	Speedway Management Inc.			
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRI	<u>:SS)</u>	<del></del>
	17631 Nathans Drive			
	TAMPA . F	3364	7	<del></del>
			-	PALLAHASSI
(b)				
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office	address:	18
	Corporation Service Company		HILED TALLANASSEE, FLORIDA	
	NEW Registered Office Address:			22. <b>5</b>
	1201 Hays Street	-		
	Tallahassee F	3230	1	
change agent v was/we he arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited last each organization or the operating agreement of the	e regist liability of the l e limite	ered office company, i imited liabi	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.
Signa	ture of a member or authorized representative of a member	_	<u>-</u>	Printed or typed name of signee
I here provisi the obl to men notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and completing tions of my position as registered agent as providely reflect a change in the registered office address, I in writing of this change.  Willad - Viensen, MP	gree to de e perfor led for it hereby	nct in this co mance of m n Chapter 6 confirm the	apacity. I further agree to comply with the ny duties, and I am familiar with and accep 505, F.S. Or, if this document is being filed at the limited liability company has been
	re of Registered Agent			

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