## 217000150204

(Re	equestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
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J. HARRIS

## **COVER LETTER**

INHS18 (2/14)

TO: Registration Section Division of Corporations					
Holley Motor Sports, LLC					
SUBJECT: Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this	s matter to the following:				
Christopher M. Duke					
Name of Person					
Holley Motor Sports, LLC	egistered Agent/Registered Office Change and fee(s) are submitted for filing.  I correspondence concerning this matter to the following:  M. Duke  Name of Person  Sports, LLC  Firm/Company  Street  Address  rida 32566  City/State and Zip Code  deaux@outlook.com  dress: (to be used for future annual report notification)  commation concerning this matter, please call:  edeaux  Agent Agent/Registered Office Change and fee(s) are submitted for filing.  By 100 and 100 an				
Firm/Company					
7084 Nelson Street					
Address	<del></del>				
Navarre, Florida 32566					
City/State and Zip Code					
ashlyrquebedeaux@outlook.com					
E-mail address: (to be used for future annu	ual report notification)				
For further information concerning this matter,	please call:				
Ashly Quebedeaux					
Name of Person					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301					
Enclosed is a check for the following	amount:				
<b>☑</b> \$25 Filing Fee	☐ \$55 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 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. Na	me of the limited liability company: Holley Motor	Sports, I	LLC	
2. (a)	7084 Nelson Street	(b)	7084 Nelson Street	
z. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(**/	Mailing address of limited liability compact (Note: MAY BE POST OFFICE BOX	-
	Navarre, FL 32566	<del></del>	Navarre, FL 32566	
	07/13/2017	L	L17000150204	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	United States Corporation Agents, INC.			
). (u)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:	
	13302 Winding Oak Court			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	92	
	Α			
	Tampa . FI	33612		
			2011 J	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	dress:	<del></del>
	Ashly Quebedeaux		SSE 22	
	NEW Registered Office Address:		# 51841 Florid	) }
	3051 Vantage Lane	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	Navarre , FI	32566		
the cha agent v was/w	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the regist ability con of the limi	stered office and the business office of the reg ompany, it is hereby confirmed that the chang nited liability company or as otherwise provid-	gistere e(s)
			hnistopher M. Duke Printed or typed name of signee	
Siena	ture of a member or authorized representative of a member		Printed or typed name of signee	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, 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 Registersa-Agent

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

FILING FEE: \$25.00