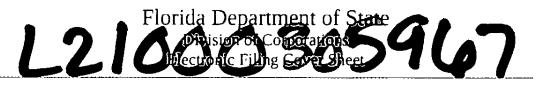
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Cmail.	Address:			
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LLC REGISTERED AGENT CHANGE C S RACING, LLC

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4/25/2024 08:16:≢9 PDT . To: 18506176383 Page: 2/2 Fax: 8134365206

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.

(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 07/02/2021	_		Mailing address of li (Note: MAY BE	mited liabili	ty company:
	07/02/2021	-				
	07/02/2021					
		_	L21000305	967		
(a)	Date of filing/registration in Florida	4.		Document num	ber	
(11)	RENEWAL SERVICE LLC					
	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of Sta	te:		
	2320 HOLLYWOOD BLVD					
	Registered Office Address MUST BE FLORIDA STREET A	_				
	<u>-</u>		-			
				_		
	HOLLYWOOD ,FL	33020		_		
(b)	Registered Agents Inc		<u> </u>		2021	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:		2024 APR	,
					₹2	· · ·
	7901 4th St N			_	5	- : .
	NEW Registered Office Address:				1913 1913	-
	STE 300				ن ب	
				_	7. 7.3	
	St Patershum 121	33702			σ	
the li	St. Petersburg , FL. Imited liability company is not organized under the law inge or changes are made, the Florida street address of	vs of the	State of F	 lorida, it is hereby	y confirme	d that after
gent v as/wo e arti	vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	bility co	mpany, it ited liabili	is hereby confirm ty company or as	ed that the	change(s)
<u></u>	une of a member or authorized representative of a member	<u>Rob</u>	in Jones	Printed or typed na		
				Printed or typed na	_	
ovisi e obl mere	w accept the appointment as registered agent and agri ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I h I in writing of this change.	ce to act perform I for in C tereby co	in this cap ance of my Thapter 60 onfirm that	pacity. I further of duties, and I am 5, F.S. Or, if this t the limited liabil	igree to co familiar w document lity compai	mply with to with and account is being fil- ny has been

David Sperts Signatuko of Registered Agent