

h21 000 347 025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

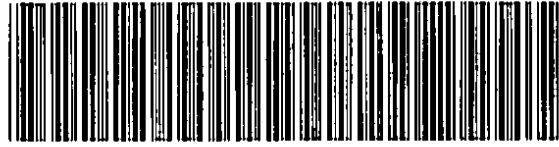
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE

2022 DEC -1 AM 8:12

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Races Logistics LLC
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:

Rose Rodriguez
Name of Person

Races Logistics LLC
Firm/Company

979 GOLF AVENUE
Address

Ormond Beach, FL 32174
City/State and Zip Code

raceslogistics@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rose Rodriguez at (386) 238-3715
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

RECEIVED
DEC 01 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2022

ROSE RODRIGUEZ
979 GOLF AVENUE
ORMOND BEACH, FL 32174

SUBJECT: RACCS LOGISTICS L.L.C.
Ref. Number: L21000347025

We have received your document for RACCS LOGISTICS L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 122A00025476

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. Name of the limited liability company: Raccs Logistics LLC

2. (a) Raccs Logistics LLC (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)

979 Golf Avenue
Ormond Beach, FL 32174

3. August 02, 2021
Date of filing/registration in Florida

4. L2000347025
Document number

5. (a) Legal Zoom
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

United States Corp Agents' INC
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
5575 South Semoran Blvd STE 306
Orlando, FL 32882

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2022 DEC - 1 AM 8:12
TALLAHASSEE, FL

(b) Rose Rodriguez
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:
979 Golf Avenue
Ormond Beach, FL 32174

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Rose Rodriguez
Signature of a member or authorized representative of a member

Rose Rodriguez
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.

Rose Rodriguez
Signature of Registered Agent