

**FILED**  
**Mar 13, 2003 8:00 am**  
**Secretary of State**

DOCUMENT # L98000001033

**RACING UNLIMITED, L.C.**



Mailing Address

4004 BAY POINTE DRIVE  
GULF BREEZE FL 32561

### 3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Country

Zip

Country

Applied For	
-------------	--

Not Applicable
----------------

☐ **\$5.00** Additional Fee Required

7. Name and Address of New Registered Agent

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$50.00**

10. ADDITIONS/CHANGES

 Delete

☐ Delete☐ Delete☐ Delete☐ Delete

 Delete

☐ Change    ☐ Addition☐ Change    ☐ Addition☐ Change      ☐ Addition☐ Change    ☐ Addition☐ Charge      ☐ Addition☐ Change    ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

3-6-03

8JC-934-179S

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date \_\_\_\_\_

Dealing Street #

CR2E083 (10/02)