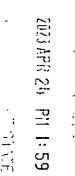
## 9000010680

(Requesto	or's Name)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: FLORIDA TRACK & POWER, INC. Name of Corporation			
DOCUMENT NUMBER: P09000010680			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
SEAN A. DOUTHARD, ESQ.			
Name of Contact Person			
WALLER LAW, P.A.			
Firm/Company			
38038 MERIDIAN AVENUE			
Address			
DADE CITY, FL 33525			
City/State and Zip Code			
btadlock@floridatp.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
SEAN A. DOUTHARD, ESQ.  Name of Contact Person  at (352 )567-4690  Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			

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

**Amendment Section** Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\underline{F}$ in the State of Floring its registered office or registered agent, or both, in the State of Floring	LORIE		
	the corporation:     FLORIDA TRACK & POWER, INC.	оғша.		
1. The name of	the corporation:			—
2. The principal	office address: 37925 VITALITY WAY, DADE CITY, FL 33526			—
3. The mailing a	address (if different): P.O. BOX 500, DADE CITY, FL 33526			
4. Date of incor	poration/qualification: 02/03/2009 Document number: P09000010	0680		
5. The name and	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)			
	MURPHY, DAVID J, ESQUIRE			
	14217 THIRD ST.			
	DADE CITY, FL 33523		2023/	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	ce	2023 APR 24	- J
	SEAN A. DOUTHARD, ESQ.		PH	2 21
	38038 MERIDIAN AVENUE		: 5	<i>کت</i> ندجه
	P.O. Box NOT acceptable  DADE CITY, FL 33525	. 1	9	
The street address changed will	ess of its registered office and the street address of the business office of its be identical.	registe	ered ag	ent,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an one board, or the corporation has been notified in writing of the change.	fficer	so	
The Signature	re of an officer or director  Printed or typed name and title	DI	recti	<u>) (</u>
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp ad I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby s been notified in writing of this change.	olete pe agent. confi	erform Or, ij rm thai	ance this t the
Sig	mature of Registered Agent Oy/20/202	5		
If signing on be	chalf of an entity:			
SEAN A. DOUT	HARD, ESQ.			
Т	yped or Printed Name			
	* * * FILING FEE: \$35.00 * * *			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314