## P20000014217

(Requestor'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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## **COVER LETTER**

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TO:	Amendment Section Division of Corporations	
	Division of Corporations	i.
CHDI	LECT. BJ MOTORSPORTS INC	
Name	JECT: BJ MOTORSPORTS INC	
<b>DOC</b>	UMENT NUMBER: P20000014217	
DOC	UMENT NUMBER:	
The e	nclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning thi	s matter to the following:
JILL I	L URSO	
Name	of Contact Person	<del></del>
	OTORSPORTS INC	
Firm/	Company	<del></del>
2430 5	SMITH STREETUNIT G	
Addre	ess	
KISSI	IMMEE, FL 34744	
City/S	State and Zip Code	
	bjmotorsports.net@gmail.co	m
E-ma	il address: (to be used for future annua	al report notification)
For fi	urther information concerning this matter,	please call:
JILL	L URSO	at (407 )247-4914
	Name of Contact Person	at (407 )247-4914  Area Code & Daytime Telephone Number
Enclo	osed is a \$35.00 check made payable to the	e Department of State.
	Mailing Address:	Street Address:
	Mailing Address: Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	ange is submitted for a corporation or	0302, 607.1308, or 617.1308, Florida Statu ganized under the laws of the State of <mark>Floric</mark> gistered agent, or both, in the State of Floric	la	
	the corporation: BJ MOTORSPORTS			
2. The principal	office address: 2430 SMITH STREET			
KISSIMMEE, F.	L 34744			
-	address (if different):			
4. Date of incor	poration/qualification: 02/11/2020	Document number: P20000014217	<i>!</i>	
	d street address of the current register rtment of State: (If resigned, enter resi	ed agent and registered office on file with thigned)	e	
	URSO, JILL L			
	2430 SMITH STREET UNIT Q			
	KISSIMMEE, FL 34744		• )	
6. The name and (if changed):	d street address of the new registered a	agent (if changed) and /or registered office		
	URSO, JILL L		<u>,</u> ,	
	2440 SMITH STREET UNIT A			
P.O. Box NOT acceptable				
	KISSIMMEE, FL 34744		_,	
The street address changed will	ess of its registered office and the str be identical.	reet address of the business office of its reg	gistered agent,	
Such change was authorized by th	as authorized by resolution duly ado he board, or the corporation has been	pted by its board of directors or by an offic i notified in writing of the change.	er so	
	12	JEFFREY M- GANBILL Printed or typed name and title	PAPHNER	
_	re of an officer or director			
I nereny accept I further agree of my duties, an document is bei corporation has	The appointment as registered agent to comply with the provisions of all s all am familiar with and accept the ing filed merely to reflect a change it s been notified in writing of this char	t and agree to act in this capacity. statutes relative to the proper and complet obligation of my position as registered age in the registered office address, I hereby co nge.	e performance ent. Or, if this nfirm that the	
		12-29-2020	)	
Sig	mature of Registered Agent	Date		
If signing on be	chalf of an entity:			
Jul	L UR SO  Typed or Printed Name			

\* \* \* FILING FEE: \$35.00 \* \* \*