I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and	
that my name appears above, or on an attachment with all other like empowered.	

SIGNATURE: KURT ALAN SNIDER

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent:

DOCUMENT# L06000038138

Current Mailing Address:

FEI Number: 45-2039953

Entity Name: VILLAGE 24-7 KART AIDE, LLC

Current Principal Place of Business:

SNIDER, KURT ALAN 3955 SW 57TH CT OCALA, FL 34474 US

704 FLATWOODS RD LEESBURG, FL 34748

P.O. BOX 578 OXFORD, FL 34498

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KURT ALAN SNIDER

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	CEO
Name	SNIDER, KURT ALAN
Address	3955 SW 57TH CT
City-State-Zip:	OCALA FL 34474

Certificate of Status Desired: No

07/19/2023

Date

Date

07/19/2023

FILED Jul 19, 2023 Secretary of State 5213938170CC

CEO