201000019286

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Control Faith Mann)							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
J. HORNE							
DEC - 2 2021							
DEC - 2 ZUZI							

Office Use Only



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11, '09,'21--01920--002 ++25.09



COVER LETTER

Divi	sion of Corporations						
SUBJECT:	ERDMAN PROPERTIES L.L.C.						
	Name of Limited Liability Company						
Dear Sir or N	Madam:						
The enclosed	d Registered Agent/Registered O	office Change and	fee(s) are submitted for filing.				
Please return	all correspondence concerning	this matter to the f	following:				
ВЕТН А ВАХ	XTER						
	Name of Person		_				
ERDMAN AU	UTOMOTIVE						
	Firm/Company						
4650 HIGHW	'AY 520						
	Address		<u> </u>				
COCOA, FL	32926						
	City/State and Zip Code		_				
BBAXTER@	MIKEERDMANMOTORS.COM						
E-mail	address: (to be used for future ar	nual report notifi	cation)				
For further in	nformation concerning this matte	r, please call:					
ВЕТН А ВАХ	KTER	321 at (453-1313				
	Name of Person		Area Code & Daytime Telephone Number				
Regi Divi: P.O.	ling Address: stration Section sion of Corporations Box 6327 thassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclo	osed is a check for the followin	g amount:					
X \$2	5 Filing Fee	□ \$5.	5 Filing Fee & Certified Copy				

TO: Registration Section

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. N	lame of the limited liability company: ERDMAN PROP	ERTH	ES, L.L.C.				
2. (a)	4650 HIGHWAY 520		(b) 4650 HIGHWAY 520				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limit	, , ,		
	COCOA, FL 32926		COCOA.	FL 32926			
		_		<u> </u>			
	11/07/2001		L01000019	9286			
3.	Date of filing/registration in Florida	4.		Document number	r		
5. (a	HOWARD M SWERBILOW						
	Registered Agent and Registered Office shown on the records of 600 FLORIDA AVE	the Flo	rida Dept. of Sta	ate:			
	Registered Office Address (MUST BE FLORIDA STREET A	4DDR	ESS)	_			
	COCOA . FL	32922	2	_	202		
(b)	RETH A RANTER			-	POZI NOV -9 SECRETARY SECRETARY		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			. SSS	6- 6-		
	4650 HIGHWAY 520				RANGE D		
	NEW Registered Office Address:	_	<u> </u>	_			
				_	*		
	COCOA, FL	32926		_			
agent was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	regist bility f the l limite	ered office an company, it i limited liabilit	nd the business office is hereby confirmed ty company or as oth npany.	e of the registered		
Signa	ture of a member or authorized representative of a member	-	HCHAEL II E.	Printed or typed name	af signag		
I here provisi the obi	waccept the appointment as registered agent and agree of all statules relative to the proper and complete placetions of my position as registered agent as provided by reflect a change in the registered office address. I have the change of this change.	e to a perfor I for in ereby	ict in this cap, mance of my i Chapter 603 confirm that				
Signatu	re of Registered Agent						

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00