<u>L02000034700</u>

(Requestor's Name)	
(Address)	800424
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	02/29/240
(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO:		stration Section sion of Corporations				
SUBJI	South Florida Auto Auction of Fort Lauderdale, LLC BJECT:					
		Name of Limited Liability Company				
Dear S	ir or M	Aadam:				
The en	closec	Registered Agent/Registered Office Cl	nange and	fee(s) are submitted for filing.		
Please	return	all correspondence concerning this mat	ter to the	following:		
Starling	g N. He	endriks, Esq.				
		Name of Person		_		
Bond S	Schoen	eck & King PLLC				
		Firm/Company				
4001 T	amiam	i Trail North, Suite 105				
		Address				
Naples.	, FL 3	4103				
		City/State and Zip Code		_		
shendri	iks@bs	ik.com				
E	-mail	address: (to be used for future annual re	port notifi	cation)		
For fur	ther ir	nformation concerning this matter, pleas	e call:			
Starling	g N. He	endriks, Esq. at	239	659-3804		
		Name of Person	`	Area Code & Daytime Telephone Number		
	Regi Divi P.O.	ling Address: Istration Section Sion of Corporations Box 6327 That see, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Encl	osed is a check for the following amo	ant:			
	= \$3	25 Filing Fee	□ \$£	55 Filing Fee & Certified Copy		

INHS18 (2/14)

BOND SCHOENECK & KING

4001 Tamiami Trail North, Suite 105 | Naples, FL 34103-3556 | bsk.com

STARLING N.HENDRIKS, ESQ. shendriks@bsk.com

P: 239.659.3804 F: 239.659.3812

February 23, 2024

VIA FIRST CLASS MAIL

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: South Florida Auto Auction of Fort Lauderdale, LLC

Dear Sir or Madam:

Enclosed please find a check in the amount of \$25.00 representing the filing fee for the Statement of Change of Registered Agent/Registered Office Change form for the above referenced matter.

Please return all correspondence concerning this matter to my attention. Should you have any questions, please feel free to contact me on my direct line at: 239.659.3804.

Very truly yours,

BOND, SCHOENECK & KING, PLLC

Aus J. Hu du in Starling N. Hendriks

Senior Counsel

SNH/MAR Enclosures

Cc: South Florida Auto Auction of Fort Lauderdale, LLC

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	ame of the limited liability company: South Florida At	ito Aucti	on of Fort La	uderdale, LLC
2. (a)		1	b)	
•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3500 N.W. 21st Street		3500 N.W	7. 21st Street
	Lauderdale Lakes, FL 33311		Lauderdal	le Lakes, FL 33311
	12/24/2002		65-116670-	.
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	·			
J. (u.	Registered Agent and Registered Office shown on the records of		la Dept. of Stat	- le:
	Gregory M. Wilson			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	<u></u> <u>S)</u>	7 70
	29 E. Pine Street			SEC 24F
	Orlando FL	32801	- 1 .	2024 FEB 29 PH 3: 40 SECRETAL OF STATE TALLAHASSEE FLORIDA
				9 1
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>			- PR
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	<u>idress</u> :	3: 10
	Starling N. Hendriks, Esq.			設用 る
	NEW Registered Office Address:	_	<u> </u>	
	4001 Tamiami Trail North, Suite 105			_
	Naples	34103		
	, 1'L	·—		_
f the l	imited liability company is not organized under the lay	vs of the	State of Flo	orida, it is hereby confirmed that after the
igent v	e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lis	ibility co	ompany, it is	s hereby confirmed that the change(s)
vas/w	ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	of the lin	nited liabilit	v company or as otherwise provided in
/ /	Will A N I. no		rryl E. Lorenz	• •
<u>~·</u>	ture of a phemoer or authorized representative of a member			Printed or typed name of signee
provisi he obl o m er	by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. It din writing of this change.	ee to ac perform I for in (iereby c	t in this capa ance of my a Chapter 605 onfirm that i	acity. I further narge to comply with the
Signan	re of Registered Agent			