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SECRETARY OF STATE

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COVER LETTER

Division of Corpo			•	
SUBJECT:	King Motor	Co. of	Kissimmee, LLC.	
SUBJECT: King Motor Co. of Kissimmee, LLC (Name of Limited Liability Company)				
		•		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please return all correspo	ondence concerning	this matter to th	ne following:	
			·	
V.v.k	T Francis			
Kirk J. Francis (Name of Person)				
King	Manageme (m/Company)	ent Ctd		
(Firm/Company)				
1345 S. Federal Highway (Address)				
(.	Address)		·	
D. A. H. D 5 27444				
Deer field Beach, Fe 33441 (City/State and Zip Code)				
			,	
For further information concerning this matter, please call:				
KICK J. FR	rancis	at (954	574 · 4636 ode & Daytime Telephone Number)	
(Name of	Person)	(Area Co	ode & Daytime Telephone Number)	
CERTER/COURT	en innneco.	Bar A YI	LING ADDDDGG	
STREET/COURING Registration Section			LING ADDRESS: stration Section	
Division of Corpora		Divis	ion of Corporations	
Clifton Building 2661 Executive Ce	nter Circle		Box 6327 hassee, Florida 32314	
Tallahassee, Florid		t anai	nassee, i fortua 323 14	
Enclosed is a check for the following amount:				
☐ \$25 Filing Fee	;	□ \$55	Filing Fee & Certified Copy	
5			- · · · ·	



August 22, 2008

KIRK J. FRANCIS KING MANAGEMENT LTD 1345 S. FEDERAL HIGHWAY DEERFIELD BEACH, FL 33441

SUBJECT: KING MOTOR CO. OF KISSIMMEE, LLC

Ref. Number: L03000021054

We have received your document for KING MOTOR CO. OF KISSIMMEE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

• We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 408A00047075

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company:King_Mo	otor Co. of Kissimmee LCC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	Deerfield Beach, FL 33441
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1345 S. Federal Hwy Decrheld Beach, FL 33441
6/11/03	403000021054
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	W. Clay King
Registered Office Address:	700 E. Sunrise Blud
	Ft. Lauderdale, Re 33304
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:
NEW Registered Agent:	W. Clay King.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Deer field Beach ,FL 33446,
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited liability company. (Signature of a member of authorized representative of a member)	at address of the registered office and the business ase of a Florida limited liability company, it is
	₩ G
(Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified (Signature of Registered Agent)	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.

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