## 603000028321

(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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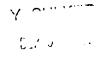
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## COVER LETTER

TO: Registration Section Division of Corporations	,				
DORAL HYUNDALLIC					
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Cheryl Wilke					
Name of Person					
Lewis Brisbois					
Firm/Company					
110 S.E. 6th Street, Suite 2600					
Address					
Fort Lauderdale, Florida 33301					
City/State and Zip Code					
Cheryl.Wilke@lewisbrisbois.com					
E-mail address: (to be used for future annual r	report notification)				
For further information concerning this matter, plea	ise call:				
OHEILYL WILLE a Name of Person	t ( <u>US4</u> ) <u>445-4044</u> Area Code & Daytime Telephone Number				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclosed is a check for the following amo					

## 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.	Na	me of the limited liability company: DORAL HYUNDA	ALLLC			
2.	(a)	10285 NW 12 STREET DORAL, FL 33172	(	(b) 21400 NW 2ND AVENUE MIAMI, FL 33169		
-	()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	_		dailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
3.		08/01/2003  Date of filing/registration in Florida	4.		30000283	21 Document number
5.	(a)	Andrew S. Brown, Esq.				
	• /	Registered Agent and Registered Office shown on the records of the 20950 NW 2ND AVENUE MIAMI, FL 33169			ept, of State	:
		Registered Office Address (MUST BE FLORIDA STREET A)	<u>DDRES.</u>	<u>S)</u>	,	
		FL				
		, FL_				
	(b)					87 · is
	,	Enter name of NEW Registered Agent and/or NEW Registered C	Office ac	ddre	<u></u>	
		Charley II				MI AUG 27 PH 2: 2: WAY OF STATE
		Cheryl Wilke				
		NEW Registered Office Address:				SET 2
		110 S.E. 6th Street, Suite 2600				TA ?
		Fort Lauderdale FL	33301			
cha age wa.	inge int w s/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the re fill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of eles of organization or the operating agreement of the li	egister oility co the lin	ed omp nite	office and pany, it is d liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	<u>/</u>		Just	tin 1	Dash ————	
	_	ure of a member or authorized representative of a member				Printed or typed name of signee
I h pro the to i hot	eret visio obli nere ifìea	waccept the appointment as registered agent and agree ins of all statutes relative to the proper and complete pegations of myposition as registered agent as provided livingled actions of this change in the registered office address. The lift writing of this change	e to aci erform for in C ereby co	t in canc Cha onfi	this capa re of my d pter 605, irm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Sig	natur	e of Registered Agent				
-		- · · · · ·				