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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Fantabulous Cars, 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 correspondence concerning	g this matter to the following:
Luis A. Cordero, Esq.	
(Name of Person)	
Cordero & Associates, P.A. (Firm/Company)	O7 AP SECRE
200 S. Biscayne Blvd. Suite 4650	APR -6 PM 4: 07 RETARY OF STATE AHASSEF FLORIDA
(Address)	PH 4: C
Miami, FL 33131	O7
(City/State and Zip Code)	
For further information concerning this mat	ter, please call:
Luis A. Cordero, Esq.	at (305) 777-2677
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	ng amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

'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. The name of the limited liab	ility company is:	Fantabulous Cars, LLC	1447	
2. The mailing address of the li	mited liability cor	npany is : 200 S. Biscayne	Blvd. #4650	
Miami, FL 33131				
05/16/2006 L06000050127				
3. Date of filing/registration in Florida		4. Document nu	mber	
5. The name of the registered ag Florida Department of State:	gent and the regist	ered office address as shown	on the records of the	
Van	Vanessa J. Gajardo		T _C C =	
Name CS 07				
200 S. Biscayne Blvd. #4650				
Name 200 S. Biscayne Blvd. #4650 Address				
Miami, FL 33131			May on the	
City, State and Zip				
6. The name and address of the new registered agent and/or office:		PH 4: 07 OF STATE FELORIDA		
Cordero & Associates, P.A.)7 DA		
Name 200 S. Biscayne Blvd. #4650		-		
Florida street address (P.O. Box NOT acceptable)				
Mian	ni	FL 33131		
	City, Sta	ate and Zip		
If the limited liability company	is not organized u	nder the laws of the State of	Florida, it is hereby	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member of authorized representative of a member)

Luis A. Cordero, Esq. Authorized Representative of Member

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 6fff, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I pereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)