LD7000035694

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(Address)		
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(City/State/Zip/Phone #)		
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C. LEWIS
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EXAMINER

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COVER LETTER Registration Section TO: **Division of Corporations** SUBJECT: CarTHINK Automotive Services, 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 this matter to the following: Divna Swiderski (Name of Person) CarTHINK Automotive Services, LLC (Firm/Company) 900 Linton Blvd., Suite 200 (Address) Delray Beach, FL 33444 (City/State and Zip Code) For further information concerning this matter, please call: Diyna Swiderski (Area Code & Daytime Telephone Number) (Name of Person) STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301

\$55 Filing Fee & Certified Copy

INHS18 (5/08)

✓ \$25 Filing Fee

Enclosed is a check for the following amount:

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: CarTHINE	K Automotive Services, LLC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 900 Linton Blvd., Suite 200 Delray Beach, FL 33444
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	900 Linton Blvd., Suite 200 Delray Beach, FL 33444
4/3/2007	<u>L07000035694</u> 4. Document number
3. Date of filing/registration in Florida	
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	Bruce Turiansky
Registered Office Address:	900 Linton Blvd., Suite 200 Delray Beach, FL 33444
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:
NEW Registered Agent:	Diyna Swiderski
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	900 Linton Blvd., Suite 200 Delray Beach, FL 33444 ,FL
If the limited liability company is not organized under that after the change or changes are made, the Florida st office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorize liability company or as otherwise provided in the article limited liability company (Signature of a member or authorized representative of a member)	ne laws of the State of Florida, it is hereby confirmed reet address of the registered office and the business e case of a Florida limited liability company, it is d by an affirmative vote of the members of the limited is of organization or the operating agreement of the
Bruce Turiansky (Printed or typed name of signee)	
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positi F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been noti	d agree to act in this capacity. I further agree to proper and complete performance of my duties, and I ion as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby fied in writing of this change.
(Signature of Registered Agent)	
Division of Corporations, P.O. B FILING F	EE: \$25.00
INHS18 (05/08)	