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## **COVER-LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Jeff Smith Automotive Group LLC  Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/	Registered Office C	hange and fee(s) are submitted for filing.
Please return all correspondence	concerning this ma	tter to the following:
Jeff Sm		
Name of Pers	ion	
Jeff Smith Automot		
1241 Roeb	uck Ct	······································
West Palm Bead City/State and Zi		
carsbyjeff@g	mail.com e annual report notification	<u>)</u>
For further information concern	ing this matter, pleas	se call:
Jeff Smith	at (	561 ) 294-4587
Name of Person	\	Area Code & Daytime Telephone Number
STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, Florida 32301	cle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for	the following amo	unt:
\$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. Name of the limited liability company:	Smith Automotive Group LLC
2. (a) Principal office address of limited liability compan	y: 1241 Roebuck Ct.
(Note: MUST BE STREET ADDRESS)	
(4.4.0	West Palm Beach, FI 33401
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	same S T
	SET O
02082008	L08000014525
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	— 1··
Registered Agent:	Smith, Jeffrey M
Registered Office Address:	2080 NW 2nd Ave Ste 6
	Boca Raton, FL 33431
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	same
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1241 Roebuck Ct
	West Palm Beach ,FL33401
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the change (of the members of the limited liability company or as other or the operating appropriate of the limited liability company.  Signature of a member or sutherized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote.
Jeffrey M Smith Printed or typed name of signee	_
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby capping that the limited liability compa	agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in the registered office

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

Signature of Registered Ag