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SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: <u>LPG MOTORS</u> , <u>LLC</u> 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:		
Lucia Presper Name of Person		
LPG HOTORS, LLC Firm/Company		
1760 Canava St. Address		
Palm Blu FL 32909 City/State and Zip Code		
Patougl Ogmail Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
HICIA PROSPER at (821) 508-7810 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 amount:		
\$25 Filing Fee \$25 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.

agent, or both, in the State of Florida.	3
1. Name of the limited liability company: LPG He	otors, LLC
2. (a) Principal office address of limited liability company	v: 1760 Canoba St.
(Note: MUST BE STREET ADDRESS)	Palm Bay, FL 37909
(b) Mailing address of limited liability company:	209 Brandy Creek Ci. S
(Note: MAY BE POST OFFICE BOX)	Palm Bey, FL 32909
3. Date of filing/registration in Florida	<u>L 090000 45 413</u> 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Julia Prosper
Registered Office Address:	1760 Canoba St. & XXX Palmkay, Fl 37908 22
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	<u> </u>
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2681 Palm Pay, &d == Palm Bay, 32939 = ,FL 39909
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote
Signature of a member or abthorized representative of a member	_
Pfinled or typed name of signor	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my po Chapter 508, IF,S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent