(December 45 Name)							
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
(Only) States 21 pre hone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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Contilled Conice Contilled to a Status							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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Office Use Only

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COVER LETTER

TO:	_	stration Section sion of Corporations							
SUBJI	ECT:	T: Jaguar Land Rover North Dade, LLC Name of Limited Liability Company							
Dear S	ir or N	Aadam:							
The en	closec	Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.					
Please	return	all correspondence concerning	this matter to the	following:					
Erik Da	ay								
		Name of Person		_					
Jaguar	Land I	Rover North Dade, LLC							
-		Firm/Company							
2300 N	E 151:	st ST							
		Address							
North I	Miami,	FL 3311							
		City/State and Zip Cod	e						
eday@	warren	henryauto.com/jigonzalez@warn	renhenryauto.com						
Е	-mail	address: (to be used for future	annual report notif	ication)					
For fur	ther in	nformation concerning this mat	ter, please call:						
Erik Da	ay		305 at (690-6073					
		Name of Person		Area Code & Daytime Telephone Number					
	Regination P.O.	ling Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
	Encl	osed is a check for the follow	ing amount:						
	= \$3	25 Filing Fee	□ \$3	☐ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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.

l. Na	ame of the limited liability company:	r Nortl	h D	ade, LLC				
2. (a) <u>.</u>	2300 NE 151st ST			(b) 2300 NE 151st ST				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(υ,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	North Miami, FL 33181	_		North Mia	mi, FL 33181			
	06/08/2009	_	ı	_090000553	313			
3 .	Date of filing/registration in Florida	4.	-		Document number			
5. (a)	Fodiman, Todd A, ESQ.							
(b) .	Registered Agent and Registered Office shown on the records of t 3225 Aviation Ave				- :: -			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Suite 301				_			
	Miami	33133 EG 2023						
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				FILED PH 4: TANY OF STA			
	NEW Registered Office Address:				် မြို့ မြို့ မြို့			
	121 Alhambra Plaza, Suite 1505				_ 			
	Coral Gables, FL	33134	,		_			
hange igent v was/we	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe bility f the li limited	erec cor imi d li	d office and npany, it is led liability ability com	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in			
Siena	ture of a member or authorized representative of a member		LIK	Day	Printed or typed name of signee			
I here provisi he obl o meri notified	by accept the oppointment as registered agent and agree ions of all gratules relative to the proper and complete places of my position as registered agent as provided ely reflected change in the registered office address, I had in writing of this change.	ee to a perfor I for in ereby	ict i ma 1 C. coi	n this capa nce of my a napter 605, nfirm that t	acity. I further agree to comply with the			
Signatu	re of Registered Agent							