

LO9000056394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

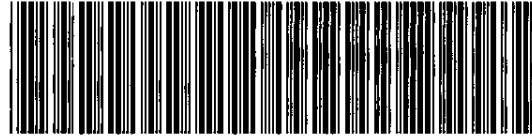
Special Instructions to Filing Officer:

A. LUNT

MAY 24 2010

EXAMINER

Office Use Only



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05/23/11 0101F-023 **25.00

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2011 MAY 23 PM 3:16

FILED

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: Car. Medic Center LLC

2. (a) Principal office address of limited liability company: 4011 S. Hwy 27

(Note: **MUST BE STREET ADDRESS**)

Sebring FL 33870

(b) Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

555 N. Hwy 27
Sebring FL 33870

6-10-09
3. Date of filing/registration in Florida

LO9000056394
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Scott R. Leconey

Registered Office Address:

4010 Dal Hall Blvd
LK Placid FL
33852

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

Miguel A. Marrero

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

4011 S. Hwy 27
Sebring, FL 33870

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 or authorized representative of a member

Miguel A. Marrero
Printed or typed name of signer

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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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