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COVER LETTER,

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: William Collier Name of Person Millennium Motor Group LLC Firm/Company 9640 Boggy Creek Rd. Unit 4 Address Orlando FL, 32824 City/State and Zip Code Millenniummotorgroup@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	O: Registration Section Division of Corporations				
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Orlando FL, 32824 City/State and Zip Code Millenniummotorgroup@gmail.com E-mail address: (to be used for future annual report notification)	Firm/Company				
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City/State and Zip Code Millenniummotorgroup@gmail.com E-mail address: (to be used for future annual report notification)	Address				
Millenniummotorgroup@gmail.com E-mail address: (to be used for future annual report notification)					
	City/State and Zip Code				
	Millenniummotorgroup@gmail.	.com	>	_	
or further information concerning this matter, please call:					
	or further information concerning this matt	er, ple	ase call	:	
William Collier at (407) 373-3639	William Collier	_ at (_	407	_)	373-3639
Name of Person Area Code & Daytime Telephone Number	Name of Person			Area Code	e & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:	STREET/COURIER ADDRESS:		MA	ILING	ADDRESS:
Registration Section Registration Section					
Division of Corporations Division of Corporations		•			
Clifton Building P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32314			Tal	lahassee,	, Florida 32314
Tallahassee, Florida 32301	Tallahassee, Florida 32301				
Enclosed is a check for the following amount:	Enclosed is a check for the following	ıg amc	ount:		

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:	Millenni	Millennium Motor Group LLC				
2. (a) Principal office address of limited liability com	rincipal office address of limited liability company:		Motor Gro	up LI	LC_	
(Note: MUST BE STREET ADDRESS)		Enterprise St. Ste ee Fl, 34761	э. Н.			
(b) Mailing address of limited liability company:		Millennium Mot	tor Group	LLC		
(Note: MAY BE POST OFFICE BOX)	397 E Ocoe	Enterprise St. Ste ee Fl, 34761	∍. H			
09/28/2009		L0900009	93227		 	
3. Date of filing/registration in Florida	4. Doc	cument number				
5. (a) Registered Agent and Registered Office shown	on the reco	ords of the Florida	Dept. of St	tate:		
Registered Agent:	<u>Willia</u>	ım Collier				
Registered Office Address:	397 E Ocoe	Enterprise St. Ste e FL, 34761	. H 音音 SS	AR 25		
			<u> </u>	-0		
			<u> </u>	H		
(b) Enter name of NEW Registered Agent and/or	NEW Regi	istered Office add	lress S	12: 0		
NEW Registered Agent:	<u>Willia</u>	ım Collier	DA ^{ri}	09		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		Millennium Motor Group LLC 9640 Boggy Creek Rd. Unit 4				
	Orlar	ndo	,FL <u>3</u>	<u> 2824</u>	. <u> </u>	
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability or operating agreement of the limite	he Florida s identical. C ge(s) was/w otherwise p	street address of the or, in the case of a l	e registered Florida lim	l offic ited		
William Collier						
Printed or typed name of signee						
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability com	nd agree to e proper an y position a o merely re pany has bo	act in this capacit ad complete perfor as registered agent flect a change in th een notified in writ	ty. I furthe mance of m t as provide ne registere ting of this	r agre ly dut ed for ed offi chan	ee to ies, in ce ge.	

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