

LD9000115361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

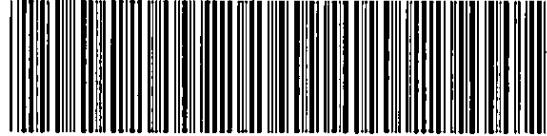
(Business Entity Name)

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SECRETARY OF STATE
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19 APR -2 PM 1:51

T.G.
04/03/19

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 707213 7413721
AUTHORIZATION : 
COST LIMIT : \$25.00

ORDER DATE : April 2, 2019
ORDER TIME : 11:45 AM
ORDER NO. : 707213-005
CUSTOMER NO: 7413721

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

CHANGE OF AGENT

NAME: DEALER WIZARD, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dealer Wizard, LLC

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:

Becky Bryan, Paralegal

Name of Person

Stinson Leonard Street LLP

Firm/Company

1201 Walnut Street, Suite 2900

Address

Kansas City, MO 64106

City/State and Zip Code

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TALLAHASSEE, FLORIDA

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Becky Bryan

Name of Person

at (816)

691-3378

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

☐ \$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 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.

1. Name of the limited liability company: Dealer Wizard, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

8201 North FM 820, Suite 100

Austin, TX 78726

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

8201 North FM 820, Suite 100

Austin, TX 78726

9/27/2017

L09000115361

3. Date of filing/registration in Florida

4. Document number

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

Gary L. Spring

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

610 W. Azeele Street

Tampa, FL 33606

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

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

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TALLAHASSEE, FL 32301

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

Patrick Brown, President and CEO

Printed or typed name of signee

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 605, 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.

Lydia Cohen
Asst. Vice President

Signature of Registered Agent



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 3, 2019

CAPITAL CONNECTION, INC.

,

Re: Document Number L11000049287

The Articles of Amendment to the Articles of Organization for ELLIOTT FAMILY HOLDINGS, LLC, a Florida limited liability company, were filed on April 2, 2019.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration Section.

Tacarri K Glass
Regulatory Specialist II
Division of Corporations

Letter Number: 919A00006574

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
ELLIOTT FAMILY HOLDINGS, LLC**

The Articles of Organization for this Limited Liability Company were filed on April 26, 2011 and assigned Florida document number L11000049287.

This Amendment is submitted to amend the following:

Title	Name	Address	Type of Action
MGR	Robert I. Elliott	39 Linden Place Summit, NJ 07901	REMOVE
MGR	Frances T. Elliott	100 Ocean Road Apartment 311 Indian River Shores, FL 32963	ADD

This Amendment shall also amend the principal office address to **100 Ocean Road, Apartment 311, Indian River Shores, FL 32963.**

Dated: April 1, 2019.

MANAGER:

Frances T. Elliott
Frances T. Elliott

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AND
FILED
2019 APR - 2 PM 8:11
CLERK OF STATE
TALLAHASSEE, FLORIDA