## LII 000 104781

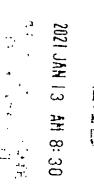
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Office Use Only



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## **COVER LETTER**

	istration Section sion of Corporations	•	•				
SUBJECT:	KENDALL LAKES AUTOMOT	IVE, LLC	·				
SOBSECT.	Name of Limited Liability Company						
Dear Sir or N	Madam:						
The enclosed	d Registered Agent/Registered C	Office Change and fe	e(s) are submitted for filing.				
Please return	all correspondence concerning	this matter to the fo	llowing:				
Abbigail Web	ob						
	Name of Person		-				
ACMGMT, L	LC						
	Firm/Company		-				
5875 NW 163	3rd Street Ste 105						
	Address		•				
Miami Lakes,	, FL 33014						
	City/State and Zip Code		<del>-</del>				
abbigail@dod	lgemiami.com						
E-mail	address: (to be used for future a	nnual report notifica	ation)				
For further in	nformation concerning this matte	er, please call:					
Abbigail Web	bb	305 at (	779-9160				
	Name of Person		Area Code & Daytime Telephone Number				
Regi Divi 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 following	ng amount:					
■ \$2	25 Filing Fee	\$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.

1. Na	ime of the limited liability company: KENDALL LAKE	S AUT	OM ——	10TIVE, L	LC			
2. (a)	16600 NW 57TH AVENUE	(1	b)	16600 NW	57TH AVEN	IUE		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (	·	N	Mailing address (Note: MAY)		•	
	MIAMI LAKES, FL 33014	_	-	MIAMI LA	KES, FL 330	14		
	09/13/2011	_	L	1100010478	81			· <del>-</del> ··
3.	Date of filing/registration in Florida	4.		I	Document nu	umber		· ·
5. (a)	GREENSPOON MARDER, P.A.							
()	Registered Agent and Registered Office shown on the records of the 200 EAST BROWARD BLVD STE 1500	ne Florid	la D	ept. of State:	:			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES.	<u>S)</u>					
						€,4 (3-1	202	
	FORT LAUDERDALE , FL.	33301					<u>ار</u>	** •
(b)	Abbigail Webb					₩.	2021 JAN 13	*
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office ad	ddre	ess:		ű.	至	energy South
	5875 NW 163rd Street		••			سور ۲۰ این ۱۳ این	8: 30	Education of
	NEW Registered Office Address:					1	1	
	Ste 105							
	Miami Lakes , FL	33014						
agent v was/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egistere oility co the lim	ed o omp nite	office and pany, it is l d liability	the business hereby confi company or	office of the	of the reat the c	gistered hange(s)
Si		Ali .	Ahı	med	<del> </del>		<del> </del>	
	ure of a member or authorized representative of a member				Printed or type		•	
the obli to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete prigations of my position as registered agent as provided by reflect a change in the registered office address, I he writing of this change.	e to act erforme for in C ereby co	t in and Cha onf	this capac ce of my di ipter 605, irm that th	city. I furthe uties, and I a F.S. Or, if to se limited lia	r agree ım famil his docu bility co	to compiar with iment is impany	oly with the and accept being filed has been
Signatur	e of Registered Agent							