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Y SULKER
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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: FLORIDA MOTORS TRUCKS O	ENTER LLC		
Name of	Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Cl	nange and fee(s) are submitted for filing.		
Please return all correspondence concerning this man	ter to the following:		
MARCELO VINOLY			
Name of Person	· · · · · · · · · · · · · · · · · · ·		
1			
Firm/Compan	<del></del>		
17151 NW 7TH AVE EXT			
Address			
MIAMI GARDENS, FL 33169			
City/State and Zip Code			
mvinoly@floridamotors.com			
E-mail address: (to be used for future annual rep	port notification)		
For further information concerning this matter, please	call:		
Dayli at (	786 828-0713		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following amous	nt:		
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy		
INH\$18 (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	me of the limited liability company: FLORIDA M	OTORS TRUCKS C	ENTER LLC	
2. (a)	17151 NW 7th Ave Ext	(b) 17151 NW 7th Ave Ext		
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mai	iling address of limited liability company: Note: MAY BE POST OFFICE BOX	
	Miami Gardens, FL 33169	Miami Gar	dens, FL 33169	
	11/10/2011	 L11000128	8434	
3.	Date of filing/registration in Florida		ocument number	
	VINOLY, MARCELO A	,,		
5. (a)	Registered Agent and Registered Office shown on the records o	f the Florida Dept, of State:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	17151 NW 7 Ave Ext		75 B	
	Miami Gardens	L 33169	2019 Juliu 1986	
(b)	SPUHLER, GABRIEL I.  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registers</u>	ed Office address:	每 2 1 1 1 1 1 1 1 1 1	
	NEW Registered Office Address:			
	17151 NW 7 Ave Ext			
	Miami Gardens , F	<sub>L_</sub> 33169		
Signal I here provis the obtomer notifie	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ature of a member or authorized representative of a member erby accept the appointment as registered agent and a tions of all statutes relative to the proper and completing actions of my position as registered agent as providedly reflect a change in the registered office address, and in writing of this change.	of the registered office a liability company, it is to of the limited liability he limited liability company.  Marcelo A. Vir	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  noly  Printed or typed name of signce	

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