## L12 U00053130

(Ře	equestor's Name)				
(Ac	idress)				
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(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	usiness Entity Nar	me)			
(Do	ocument Number)				
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## **COVER LETTER**

TO:	Registration Section Division of Corporations		·
SUBJE	A & A Auto Plus LLC DOCUME	NT # L1200005313	0
SUBJE		ime of Limited Lia	bility Company
Dear Si	r or Madam:		
The end	closed Registered Agent/Registered O	ffice Change and f	ee(s) are submitted for filing.
Please	return all correspondence concerning t	his matter to the fo	ollowing:
Jason Si	ullins		
	Name of Person		_
A & A .	Auto Plus, LEC		
	Firm/Company		_
19648 F	Hwy 27		
	Address		<del></del>
Lake W	ales, FL 33853		
	City/State and Zip Code		_
	ed72@gmail.com		
E	-mail address: (to be used for future a	nual report notific	cation)
For fur	ther information concerning this matte	er, please call:	
Jason S	ullins	863 at (	662-8698
	Name of Person	<u> </u>	Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following	ng amount:	
	\$25 Filing Fee	□ \$5	5 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. Na	nme of the limited liability company: A & A Auto Plus	s, LLC					
2. (a)	A & A Auto Plus, LLC						
(u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
	19648 Hwy 27		19648 Hv	vy 27			
	Lake Wales, FL 33853		Lake Wal	les, FL 33853		_	
	04/19/2012		L12000053	3130			
3.	Date of filing/registration in Florida	4.		Document n	umber		
5. (a)	Jason R Sullins						
J. (a)	Registered Agent and Registered Office shown on the records o	f the Flo	orida Dept. of Sta	<del>_</del> ite:		20	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 19648 Hwy 27			<del></del>		2021 FEB 2	4 4 -4 - 4 
	Lake Wales, F	L_3385	3	<del></del>	1	2 PH	11:
(b)	Michelle W. McClure  Enter name of NEW Registered Agent and/or NEW Registered Office address:					6: 28	<b>.</b>
	NEW Registered Office Address:			<del></del>			
	1308 Leone Drive			_			
	Haines City , F	L 3384	4				
Signa Signa I here provisi the obli to mere notified	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the nure of a member or authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It in writing of this change in the registered of the confection of the confection of the change in the registered	e regis iability of the e limite	tered office as company, it limited liability co	nd the busines is hereby consisty company of the property.  Printed or type pacity. I further duties and I	ss office of finned that it as otherwised name of sier agree to	the regither characteristics the characteristics provided the complying a south a	stered ngc(s) vided in  with the