L120000 13323

(Requestor's Na	me)				
(Address)					
(Address)					
(City/State/Zip/P	hone #)				
PICK-UP WAIT	MAIL				
(Business Entity	Name)				
(Document Number)					
Certified Copies Certific	cates of Status				
Special Instructions to Filing Officer					

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COVER LETTER

-	istration Section sion of Corporations						
SUBJECT:	Motorcars Management, LLC						
Name of Limited Liability Company							
Dear Sir or l	Madam:						
The enclosed	d Registered Agent/Registered (Office Change and	fee(s) are submitted for filing.				
Please return	all correspondence concerning	this matter to the f	ollowing:				
Erik Day							
	Name of Person						
Motorcars Ma	anagement, LLC						
_	Firm/Company						
2300 NE 151.	st ST						
	Address	_					
North Miami.	. FL 33181						
	City/State and Zip Code	<u> </u>	_				
eday@warrer	nhenryauto.com						
E-mail	address: (to be used for future a	nnual report notific	cation)				
For further in	nformation concerning this matt	er, please call:					
Alana Wilson	ı	305 at (690-6010				
	Name of Person		Area Code & Daytime Telephone Number				
Reg Divi P.O.	ling Address: istration Section ision 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	losed is a check for the followi	ng amount:					
■ \$2	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. N	ame of the limited liability company: Motorcars Manag	ement.	LLC	2				
2. (a)	2300 NE 151st ST	(b) 2300 NE 151st ST						
(_,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		Mailing address (Note: MAY)		-	
	North Miami, FL 33181			North Mi	ami, FL 33181			<u>-</u>
	6/01/2012		L	12000073	3323			
3.	Date of filing/registration in Florida	4.			Document nu	ımber		
5. (a)	Todd A. Fodiman, Esq.							
(,	Registered Agent and Registered Office shown on the records of 1111 Brickell Ave.	the Flo	rida I	Dept. of Sta	ate:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				Cr.	2		
	Ste. 2150					3 5	020	
	Miami, FL	33131				CEN AFX	2020 AUG 2	STATE OF THE PARTY
(b)					_	RY OF IASSE	26 AM	177
	Enter name of NEW Registered Agent and/or NEW Registered	Office	addı	<u>ess</u> :		TI CO	85	
	3225 Aviation Ave.					J. A. J. V.	58	
	NEW Registered Office Address:							
	Suite 301				_			
	Miami , FL	33133	,					
change agent v was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	regist ability of the l limite	ered con limit	office and pany, it desired liabili bility con bility con the contract of the	nd the business is hereby confi ity company or	s office of th irmed that the	ne regi: ne chai	stered ige(s)
Signa	ture of a member or authorized representative of a member		_		Printed or type	d name of sigr	nec	<u> </u>
proytsi the obi to mer	by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. It is a change in the registered office address. It is a change in the registered office address. It is a change in the registered of the registered	ee to a perfor d for it hereby	act in man n Ch r con	i this cap ce of my apter 60 firm that	pacity. I furthe duties, and I a 15, F.S. Or, if t t the limited lia	er agree to c im familiar his documen bility comp	comply with ai nt is be any ha	with the nd accept ing filed s been
Signatu	ire of Registered Agent							