## LP20000 73324

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## **COVER LETTER**

•	istration Section ision of Corporations							
SUBJECT:	Motorcars Leasing, LLC							
SOBJECT.	Name of Limited Liability Company							
Dear Sir or l	Madam:							
The enclose	d Registered Agent/Registered Offic	e Change and fe	e(s) are submitted for filing.					
Please return	n all correspondence concerning this	matter to the fol	lowing:					
Erik Day								
• •	Name of Person		-					
Motorcars Lo	easing, LLC							
	Firm/Company		•					
2300 NE 151	st ST							
	Address		•					
North Miami	, FL 33181							
•	City/State and Zip Code		-					
eday@warrei	nhenryauto.com							
E-mail	address: (to be used for future annu	al report notifica	tion)					
For further i	nformation concerning this matter, p	lease call:						
Alana Wilsor	1	305 at (	690-6010					
	Name of Person		Area Code & Daytime Telephone Number					
Reg Div P.O	iling Address: distration Section dision of Corporations dispersion Box 6327 dahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enc	losed is a check for the following a	mount:						
<b>s</b>	25 Filing Fee	☐ \$55 Filing Fee & Certified Copy						

4.4

## 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	lame of the limited liability company:  Motorcars Leasir	ng, LLC	2			
2. (a)	2300 NE 151st ST	· · · · <del>-</del>			E 151st ST	-
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0	,		of limited liability company: BE POST OFFICE BOX)
	North Miami, FL 33181			North Mi	iami, FL 33181	
	6/01/2012			L1200007.	3324	
3.	Date of filing/registration in Florida	— 4.	-	_	Document nu	ımber
5. (a)	Todd A. Fodiman, Esq.					
(b)	Registered Agent and Registered Office shown on the records of	f the Flo	rida	Dept. of St	ate:	
	1111 Brickell Ave.					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_	20	
	Ste. 2150					70 A
	Miami , FI	 L 33131	2020 AUG 2			UG 21 LAH
					_	G 26 AM TARY OF AHASSEL
		_	_		_	
	Enter name of NEW Registered Agent and/or NEW Registered	d Office	add	ress:		8: 58 STATE
	3225 Aviation Ave.					स्यं 🚥
	NEW Registered Office Address:				_	
	Suite 301		_			
	Miami	33133	3			
10.1	, , ,	<b>'</b> ——		<del></del> -	_	
cnange agent was/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	regist ability of the l limite	erec cor limi	d office as npany, it ted liability con ability con	nd the business is hereby confir ity company or :	office of the registered
Signa	nure of a member or authorized representative of a member	_			Printed or typed	I name of signee
I here provis the obt to mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I is discussed in writing of this change.	ree to a perfor d for it hereby	act i mai n Ci i coi	n this cap nce of my napter 60 nfirm that		
Signatu	re of Registered Agent					