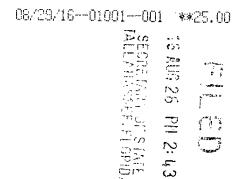
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(Requestor's Name)								
(Address)								
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(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
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COVER LETTER

TO:	Registration Section Division of Corporations								
SUBJI	ML AUTOMOTIVE GROUP, LLC								
JUDO:		Name of Limited Liability Company							
Dear S	ir or Madam:								
The en	closed Registered Agent/Registered Off	ice Change and	I fee(s) are submitted for filing.						
Please	return all correspondence concerning th	is matter to the	following:						
ALEX	(KURKIN								
	Name of Person								
KURI	KIN BRANDES, LLP								
	Firm/Company								
1885	1 NE 29TH AVE, SUITE 303								
	Address								
AVEN	NTURA, FL 33180								
	City/State and Zip Code								
akurk	in@kb-attorneys.com								
F	-mail address: (to be used for future ann	ual report noti	fication)						
For fur	ther information concerning this matter,	, please call:							
Stacy	Santiago	305	929-8500						
	Name of Person	==	Area Code & Daytime Telephone Number						
	STREET/COURIER ADDRESS:	AILING ADDRESS:							
	Registration Section	egistration Section							
	Division of Corporations	ivision of Corporations							
	Clifton Building 2661 Executive Center Circle	O. Box 6327							
	allahassee, Florida 32314								
Enclosed is a check for the following amount:									
	2 \$25 Filing Fee	D s	55 Filing Fee & Certified Copy						
INHSI	R (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	ame of the limited liability company: ML AUTOM	OTIVE GROL	IP, LLC					
2. (a)	16725 NW 57TH AVENUE	(b)						
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	V		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	MIAMI GARDEN, FL 33055					<u></u>	 -	
	AUGUST 15, 2016	L120	000908	333				
3.	Date of filing/registration in Florida	4.	Do	cument num	ber			
e /a\	TOVAR, ROGELIO							
5. (a)		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
	16725 NW 57TH AVENUE							
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				70			
	MIAMI	_L 33055			FORE INVESTI	€ 200 200	· ,=	
(b)	ALEX KURKIN				1885) 1885)	26 FII	ĺ	
()	Enter name of NEW Registered Agent and or NEW Register	ed Office address:			E. FI ORI	1 2: 43		
	NEW Registered Office Address:				1>			
	18851 NE 29TH AVE., SUITE 303							
	AVENTURA	FL_33180						
the cha agent was/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the operating agreement of the operating agreement of the operating agreement of the operations.	of the registered liability compans of the limited li he limited liabilit	office arey, it is he iability compa	nd the busines creby confirm ompany or as ny.	ss office of ned that the cotherwise	the reg	istered (8)	
	llow fore	Ko	7*.	Tova	`			
_	ature of a member or authorized representative of a member	•		inted or typed n	· ·			
provisi the ob- to mer	rby accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provi- rely refleqt a change in the registered office address, a inviving of this change	gree to act in thi le performance i ded for in Chapte I hereby confirm	is cupacit of my dut or 605, F or that the	ty, I further of ies, and I am .S. Or, if this limited liabil	agree to cor familiar wi s document lity compan	nply wi ith and is being y has b	th the accept g filed een	
Signate	ure of Registered Agent							