112000/26562

(Reque	stor's Name)							
(Address)								
(Addres	ss)							
(City/St	ate/Zip/Phone	e #)						
PICK-UP	WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies	Certificates	of Status						
Special Instructions to Filing Officer:								
		!						
		:						

Office Use Only



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Ja 10/09/20

COVER LETTER

TO: Registration Section Division of Corporations							
Dealer Enterprise Technologies, LLC SUBJECT:							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Offic	ee Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this	matter to the following:						
Erik Day							
Name of Person							
Dealer Enterprise Technology, LLC							
Firm/Company							
2300 NE 151st ST							
Address							
North Miami, FL 33181							
City/State and Zip Code							
eday@warrenhenryauto.com							
E-mail address: (to be used for future annu	al report notification)						
For further information concerning this matter, p	please call:						
Alana Wilson	305 690-6010 at ()						
Name of Person	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 a	mount:						
■ \$25 Filing Fee							

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:	Techn	olog	ics, LLC			
2. (a)	2300 NE 151st ST		(b)	2300 NE	151st ST		_
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	North Miami, FL 33181			North Mia	ami, FL 33181		
	10/03/2012	_	į.	12000126	5562		
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	nte:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Ste. 2150			_	2020 AUG SECRETY TALLA		
	Miami, FL	33131			_	TARY O	26
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office Address: NEW Registered Office Address: Suite 301			ress:	-	SEE, FL	FD 4: 56
		33133			_		
chang agent 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 tere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	regist bility f the l limite	ered com imit	office ar pany, it i ed liabili bility cor	nd the business is hereby confi ty company or	office of rmed that	the registered the change(s)
Signa	ature of a member or authorized representative of a member	_		-	Printed or types	d name of si	gnee
prøvis the ob- to mer notifie	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of the position as registered agent as provided the reflect of change in the registered office address, I had in writing of this change.	ee to a perfor I for in ereby	nct iv man v Ch con	i this cap ce of mv apter 60. firm that	pacity. I furthe duties, and I a 5, F.S. Or, if the the limited lia	r agree to m familia his docum bility com	comply with the r with and accept ent is being filed pany has been