

L13000078981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

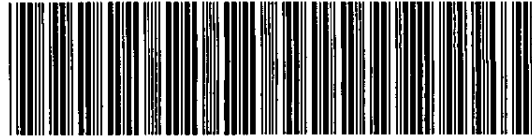
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700303037407

08/30/17--01011--028 **35.00

SEP 27 AM 8:49
FLORIDA
SECRETARY OF STATE

SEP 27 2017

Y C 1000

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAHALAK AUTO GROUP LAKE WALES, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sara Tyler

Name of Person

Mahalak Auto Group Lake Wales, LLC

Firm/Company

299 Cypress Gardens Blvd

Address

Winter Haven, FL 33880

City/State and Zip Code

sara@mahalakautogroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sara Tyler

Name of Person

at (863) 595-2155

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 1, 2017

SARA TYLER
299 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33880

SUBJECT: MAHALAK AUTO GROUP LAKE WALES, LLC
Ref. Number: L13000078981

We have received your document for MAHALAK AUTO GROUP LAKE WALES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 617A00018181

17 SEP 27 AM 8:49
RECEIVED
DIVISION OF CORPORATIONS
FLORIDA

2017 SEP 28 AM 11:55
TALLAHASSEE, FLORIDA

**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. Name of the limited liability company: Mahalak Auto Group Lake Wales, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

21529 Hwy 27

Lake Wales, FL 33859

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

299 Cypress Gardens Blvd

Winter Haven, FL 33880

6/2013

L13000078981

3. Date of filing/registration in Florida

4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Sara E Tyler

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

42650 Hwy 27

Davenport, FL 33837

(b) _____
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Krista Mahalak @ Sharit, Bunn & Chilton, P.A.

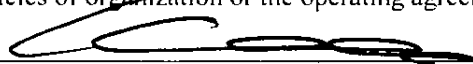
NEW Registered Office Address:

99 6th St SW

Winter Haven, FL 33880

17 SEP 27 AM 8:49
FILED
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

Michael J Mahalak

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Krista Mahalak
Signature of Registered Agent