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S. PRATHER

## **COVER LETTER**

**TO:** Registration Section

INHS18 (2/14)

**Division of Corporations** SUNCOAST AUTOMOTIVE SALES, 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: RACHELLE OYOLA Name of Person SUNCOAST AUTOMOTIVE SALES LLC Firm/Company 1711 BROWN RD Address FORT MYERS, FL 33903 City/State and Zip Code BARNETT.CHERYL@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RACHELLE OYOLA Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: 2 \$25 Filing Fee □ \$55 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. Na	ame of the limited liability company: SUNCOAS	T AUTC	M	OTIVE S	ALES LLC
2. (a)	RACHELLE OYOLA	-	(b)	RACHE	LLE OYOLA
<b>-</b> . ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	1711 BROWN RD			1711 BF	ROWN RD
	FORT MYERS, FL 33903	<del></del> -		FORT M	IYERS, FL 33903
	02/27/2014		L	.1400003	33591
3.	Date of filing/registration in Florida	4.	_		Document number
5. (a)	CHERYL BARNETT				
J. (u)	Registered Agent and Registered Office shown on the records	of the Flor	ida	Dept. of State	- e:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				•
	1711 BROWN RD				• <del>•</del> <del>•</del> • • • • • • • • • • • • • • •
	FORT MYERS	<sub>FL</sub> 3390	3		$\bar{\omega}_{ij}$
	,	rL			
(b)	RACHELLE OYOLA				. වා
, - ,	Enter name of NEW Registered Agent and/or NEW Register	red Office	add	ress:	. <u> </u>
	RACHELLE OYOLA				
	NEW Registered Office Address:				-
	1711 BROWN RD				
	FORT MYERS	FL_3390	3		-
the cha agent v was/we the arti	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the properties of a member of	of the reg l liability is of the li he limite	gist cor imi d li	ered office npany, it is ted liabilit	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
provisi the obl to mero notified	by accept the appointment as registered agent and a const of all statutes relative to the proper and completive in the proper and completive forms of my position as registered agent as provided reflect a change in the registered office address, I in writing of this change.  Division of Corporations P. C.	gte perfor ded för i I hereby	ma 1 C. co.	nce of my hapter 605 nfirm that	duties, and I am familiar with and accept i. F.S. Or. if this document is being filed the limited liability company has been

FILING FEE: \$25.00