1140000 52565

(Requestor's Name)				
(Address)				
(Address)				
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



500338658795

81/88/39--01015--017 **35.69

020 JAN -6 AH 8: 50

C GOLDEN FEB - 7 2020

COVER LETTER

INHS18	2 (2/14)		
	☑ \$25 Filing Fee		\$55 Filing Fee & Certified Copy
	Enclosed is a check for the following	amount:	•
	Tallahassee, Florida 32301		
	2661 Executive Center Circle	Tallahassee, Florida 32314	
	Clifton Building	P.O. Box 6327	
	Division of Corporations	Division of Corporations	
	Registration Section	MAILING ADDRESS: Registration Section	
	STREET/COURIER ADDRESS:		·
	Name of Person	at (Area Code & Daytime Telephone Number
Richa	rd A Mocerino	", ₍ 321	, 759-3250
For fur	ther information concerning this matter.	please call:	
E	-mail address: (to be used for future ann	ual report n	otification)
Breva	ardAuto@Gmail.Com		
	City/State and Zip Code	· • • • • • • • • • • • • • • • • • • •	 _
Titusy	ville FL 32780		
	Address		,
4170	barna Ave, Unit C		
	Firm/Company		
Skeld	on Consulting		
	Name of Person		-
Eric L	Skeldon, CMA		
	return all correspondence concerning th		_
The en	closed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.
Dear S	ir or Madam:		
., ., .,		ne of Limite	d Liability Company
SUBJI	ECT. 321 Car Dealers LLC		

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: 321 Car Deal	lers LLC	
2. (a)	485 Cone Road, Merritt Island FL 32952	(h) 3137	Rob Cay Dr, Merritt Island FL 32952
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	03/31/2014	L14000	0052565
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	THERESA M ZORN TAX & ACCOUNTING	SVC	
. (.,	Registered Agent and Registered Office shown on the records of 40 Nevins Court Registered Office Address (MUST BE FLORIDA STREET)		State: 2020 JA
	Merritt Island FI	32952	
(b)	Eric L Skeldon CMA		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	l Office address:	
	4170 Barna Ave		
	NEW Registered Office Address: Unit C		_
	Titusville FI	32780	
ine cha agent v was/wa	imited liability company is not organized under the lainge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative yote of the members of icles of organization of the operating agreement of the	f-the registered of lability company, of the limited liab limited liability of	fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.
		Richard A	Mocerino MGR
	fure of a member of authorized representative of a member		Printed or typed name of signee
the obj to men	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, ! d in writing of this change.) J32331f213789121392729 23 f w	no distince and base from the matter and the second are and
/ Signatu	ire of Registered Agent		