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(Re	questor's Name)	
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(Business Entity Name)		
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## COVER LETTER

**TO:** Registration Section Division of Corporations

SUBJECT: Portwoods Auto Elite			
Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Ronnie Portwood  Name of Person			
Portwoods Auto Elite Firm/Company			
1412 granville Ln Address			
orlando fl 3283 City/State and Zip Code			
Portwood limited a gmail. com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Ronnic Portwood at (305) 922 4134  Name of Person 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 & Certified Copy			
INHS18 (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

1. Name of the limited liability company:  2. (a) 4 10 North Street  Principal office address of limited liability company:  (Note: MIST BE STREET ADDRESS)  Unit # 192	suomii. Floride	s the following statement in order to change its registered office or r 1.	egisterea agent, or both, in the State of
2. (a) 4 10 North Street  Principal office address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  ON 1 H H 192  longwood fl 32750  O6 06 / 2014  3. Date of filling/registration in Florida  5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  6 48			to Elite 110
(Note: MAY BE POST OFFICE BOX)  Unit # 192		4 10 north Street (b) 14	2 granville LN
Independent of the Florida STREET ADDRESS)  The Enter name of NEW Registered Agent and/or NEW Registered Office address:    Sweet 192		(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)
3. Date of filing/registration in Florida  A. Document number  5. (a) Ronnie Portuod Registered Office shown on the records of the Florida Dept. of State:  648 P Semora Blud  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  # 6  Where Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  # 10  Enter name of NEW Registered Agent and/or NEW Registered Office address:  # 10 North Street  NEW Registered Office Address:  Sweet 192  In 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 voje of the members of the limited liability company or as otherwise provided in the articles of organization or its Operating agreement of the limited liability company or as otherwise provided in the articles of organization or its Operating agreement of the limited liability company or as otherwise provided in the articles of organization or its Operating agreement of the limited liability company or as otherwise provided in the articles of organization or its Operating agreement of the limited liability company or as otherwise provided in the provisions of all statutes relative to the proper and complete performance of my duties, and 1 am familiar with and accept the appointment as registered agent as provided for in Chapter Obs. F.S. or if this document is being filed to merely reflect a change in the registered agine address. I hereby confirm that the limited liability company has been notified in myiting of the registered office address. I hereby confirm that the limited liability company has been notified in myiting of the registered agent and spread of the confirmance of my duties, and 1 am familiar with and accept to the proper and complete performance of my			ando +1 32830
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:  648		longwood +1 3d/50	· · · · · · · · · · · · · · · · · · ·
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  648  Semora Blud  Registered Office Address  (MUST RE FLORIDA STREET ADDRESS)  Enter name of NEW Registered Agent and/or NEW Registered Office address:  410  POTH Street  NEW Registered Office Address:  Sweet 192  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 or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of a member of a statutes relative to the proper and complete performance of my duties, and I am Jamiliar with and accept the obligations of my position 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 Jamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Of this document is being filed to merely reflect a change in the registered agent and spread of the confirm that the limited liability company has been notified in wijting of his formance of files address. I hereby confirm that the limited liability company has been notified in wijting of his change in the registered office address. I hereby confirm that the limited liability company has been notified in wijting of his change in the registered office address.		06/06/2014 614	1000091151
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  648	3.	Date of filing/registration in Florida 4.	Document number
Registered Office Address  ## 6  Winter Park  FL 32792  (b)  Enter name of NEW Registered Agent and/or NEW Registered Office address:  ## 10 North Street  NEW Registered Office Address:  Sweet 199  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 of authorized representative of a member 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 005, 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 the registered.	5. (a)		_
(b)  Enter name of NEW Registered Agent and/or NEW Registered Office address:  400 North Street  NEW Registered Office Address:  500 North Street  100 Nor		FUO IS C	te:
(b)  Enter name of NEW Registered Agent and/or NEW Registered Office address:  4/O North Street  NEW Registered Office Address:  Sweet 192  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 of authorized representative of a member  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 address, I hereby confirm that the limited liability company has been notified in writing of this change.			_
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