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•	COVER LETTER
TO: Registration Section Division of Corporations	
SUBJECT: Lube Tec E	Spress LLC 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 n	natter to the following:
Jonathon R. Schu Name of Person	valtz
Lube Tec Firm/Company	
8060 W. Waters	Ave
Tampa FL 331 City/State and Zip Code	615
Jone wheeltec. con E-mail address: (to be used for future annua	al report notification)
For further information concerning this matter, p	lease call:
Jonathon Schwartz Name of Person	at (813) 389-9997 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

Tallahassee, Florida 32301

\$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.

10/1411.	
1. Nam	ne of the limited liability company: Lube Tec Express LLC
2. (a)	8060 W. Waters Ave (b) 8060 W. Waters Ave.
	Principal office address of limited liability company: Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	TAMOR, FL 33615 TAMOR, FL 33615
	0.2115
_	9-21-15 L14000155000 Description in Florida 1
3.	Date of filing/registration in Florida 4. Document number
	Linsky, Michael A
1	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	5210 Interbay Blud.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	22/11
	TAMPA FL 33611
	Jonathan R. Schwartz
(b)	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	2060 W. Waters And
	NEW Registered Office Address:
	NEW Registered Office Address.
	22/17
	TAMPA ,FL 33615
If the l	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the cha	inge or changes are made, the Florida street address of the registered office and the business office of the registered
agent v	will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the art	icles of organization or the operating agreement of the limited liability company.
/	Jonathan R. Schwartz uture of a member or authorized representative of a member Jonathan R. Schwartz Printed or typed name of signee
Signa	sture of a member or authorized representative of a member Printed or typed name of signee
1 here	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the
provis the ob	ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed rely reflect a change in the registered office address, I hereby confirm that the limited liability company has been
to mer notifie	rely reflect a change in the registered office address, I hereby confirm that the limited liability company has been ad in writing of this change.
	Inthe R. Wheel
Signat	re of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00