## 114000144959

(Requestor's Name)				
	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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09/10/18--01007--018 \*\*25.00

18 SEP 10 FF 4: 69

Services Supplementation

## **COVER LETTER**

TO:	Registration Section Division of Corporations						
SHRIF	McDaddy & Sons Auto LLC						
SUBJECT: Name of Limited Liability Company							
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Off	ice Change and fe	ec(s) are submitted for filing.				
Please	return all correspondence concerning the	is matter to the fo	llowing:				
Sach	a Sam						
<u></u>	Name of Person		-				
McDa	addy & Sons Auto LLC						
	Firm/Company		-				
4620	Babcock ST NE						
	Address		-				
Palm	Bay, FL 32905						
<del></del>	City/State and Zip Code		-				
mcda	ddysonsauto@gmail.com						
Е.	-mail address: (to be used for future ann	ual report notifica	ation)				
For fur	ther information concerning this matter,	please call:					
Sacha	a Sam	612 at (	366-6964				
	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 Fcc	<b>□ \$</b> 55	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 submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

McDaddy & Sons Auto LLC

Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  Date of filing/registration in Florida  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address  (MUST BE FLORIDA STREET ADDRESS)  Palm Bay  32907	
Date of filing/registration in Florida 4. Document number  Sacha Sam  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1382 Sequoia RD NW	
Date of filing/registration in Florida 4. Document number  Sacha Sam  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1382 Sequoia RD NW	
Sacha Sam  (a)  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1382 Sequoia RD NW	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1382 Sequoia RD NW	
1382 Sequoia RD NW	
1382 Sequoia RD NW	100
Palm Bay 32907	SES
	. =
, rt,	
(b)	. 🚎
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:	0.9
	مبد
VIVIV Decision 1000 and Marris	
NEW Registered Office Address: 4620 Babcock ST NE	
Palm Bay 32905	
he limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed change or changes are made, the Florida street address of the registered office and the business office of	
ent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the	change(
s/were authorized by an affirmative vote of the members of the limited liability company or as otherwise articles of organization or the operating agreement of the limited liability company.	provided
	7 h
ignature of a member or authorized representative of a member Printed or typed name of signee	<u> </u>
vereby acceptifine appointment as registered agent and agree to act in this capacity. I further agree to con-	moly wit
nereby accept the appointment as registered agent and agree to act in this capacity. I further agree to consistions of all statutes relative to the proper and complete performance of my duties, and I am familiar with obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document merely reflect a change in the registered office address, I hereby confirm that the limited liability companyified in writing of these hange.	mply with ith and a is being ny has be



Department of State / Division of Corporations / Search Records / Detail By Document Number /

Previous On List Next O	n List Return to List	Entity Name Search Search
Events No Name Histo	огу	
Detail by Entity N	ame	
Florida Limited Liability Con MCDADDY & SONS AUTO		
Filing Information		
Document Number	L14000144959	
FEI/EIN Number	47-1861418	
Date Filed	09/16/2014	
Effective Date	09/16/2014	
State	FL	

State FL Status ACTIVE

Last Event REINSTATEMENT

Event Date Filed 10/23/2017

Principal Address -

4570 BABCOCK ST NE

2

**PALM BAY, FL 32905** 

**Mailing Address** 

4570 BABCOCK ST NE

2

**PALM BAY, FL 32905** 

old address

We need to update out office address.