## L15000022808

(Requestor's Name)				
(Address)				
(Address)				
(City/	State/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Fi	ling Officer. 22808	\$ 52∞		
	J DEN.CS			
	SEP 2.0. 2023			

Office Use Only



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09/18/23--01028--003 ++525.00

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJE	West Broward Imports, LLC					
		Name of Limited Liability Company				
Dear Si	ir or Madam:					
The end	closed Registered Agent/Registered	Office Change and i	ee(s) are submitted for filing.			
Please	return all correspondence concerning	g this matter to the f	ollowing:			
Erik Da	у					
	Name of Person		_			
West B	roward Imports, LLC					
	Firm/Company		_			
2300 N	E 151st ST		_			
	Address		_			
North N	Miami, FL 3311					
-	City/State and Zip Coo	le	<del></del>			
eday@v	warrenhenryauto.com / jigonzalez@war	renhenryauto.com				
E	-mail address: (to be used for future	annual report notific	cation)			
For fur	ther information concerning this mat	ter, please call:				
Erik Da	y	305 at (	690-6073			
	Name of Person		Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the follow	ing amount:				
	■ \$25 Filing Fee	<b>□</b> \$5	5 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.

1. N	ame of the limited liability company: West Broward Im	ports.	LLC		
2. (a)	4645 Volunteer Road		(b) 2300 NE 151st ST		
2. (u)	Principal office address of limited liability company:	<del>_</del>		Mailing address of limited liability company:	
	(Note: MUST BE STREET ADDRESS)  Davie, FL 33330		North Miar	ni, FL 33181	
	Davie, 1 E 33330			ш, г. С. Ј. Ј. Ј. Г.	
	02/05/2015	_	L150000228	08	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Fodiman, Todd A, ESQ.				
J. (U.	Registered Agent and Registered Office shown on the records of 3225 Aviation Ave	the Flo	orida Dept. of State	:	
	Registered Office Address (MUST BE FLORIDA STREET) Suite 301	4DDR	ESS)		
	Miami , FL	3313	3		
	Enter name of NEW Registered Agent and/or NEW Registered  NEW Registered Office Address:				
	121 Alhambra Plaza, Suite 1505				
	Coral Gables FL	3313	4		
chang agent was/w	limited liability company is not organized under the law e or changes are made) the Florida street address of the will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	regis ability of the	tered office and company, it is limited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
		E	Erik Day		
_	ature of a member or authorized representative of a member	-		Printed or typed name of signee	
I here provis the ob to mer notifie	thy accept the oppointment as registered agent and agricons of all statutes relative to the proper and complete ligations for my position as registered agent as provided rely reflect a change in the registered office address. It is a full for this change.	ee to perfo d for i hereby	act in this capa rmance of my d in Chapter 605, y confirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Signati	ure of Registered Agent				