## 116000044925

	-						
	(Requestor's Name)						
	(Address)						
	(Address)						
	(City/State/Zip/Phone #)						
PICK-UF	P WAIT MAIL						
	(Duninger Entity Name)						
(Business Entity Name)							
	(Document Number)						
Certified Copies	Certificates of Status						
Special Instructions	s to Filing Officer:						
Special instructions	S to Tilling Officer.						

Office Use Only



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S. PRATHER

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
CHDH	E.W.	Perfoma	ance S	Shop LLC	
SUBJI	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Of	fice Chang	ge and I	fee(s) are submitted for filing.	
Please	return all correspondence concerning t	his matter	to the f	following:	
	Alberto Salva				
	Name of Person			_	
A. S.	& Company				
	Firm/Company	<u> </u>		_	
РО В	ox 192136				
	Address			_	
San	Juan, Puerto Rico 00919-2136				
	City/State and Zip Code			_	
	ascompanypsc@gmail.com	n			
Ë	-mail address: (to be used for future ar	inual repor	t notifi	cation)	
For fur	ther information concerning this matte	r, please ca	all:		
	Jose Marrero Martell	at (	305	725-2886	
	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		Reg Div P.O	sistration Section ision of Corporations Box 6327 lahassee, Florida 32314	
Enclosed is a check for the following amount:					
	<b>☑</b> \$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. Name of the limited liability company: E. W. Performance Shop LLC					
2	(a)	1212 Enterprise Dr	(b)		
	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited li (Note: MAY BE POST O	
		Unit 7			
		Port Charlotte FL 33953			<u> </u>
		March 3, 2016		L16000044925	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	Jose Marrero Martell			
• .	()	Registered Agent and Registered Office shown on the records	of the Florida Dept. o	of State:	
		1212 Enterprise Dr		•,	18
		Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	•	<u>ה</u>
		Unit 7			
		Port Charlotte	FL_33953		(.) 
		· ·	1 L	<del></del>	를 주
	(b)	Jose Marrero Martell			): 20
	•	Enter name of NEW Registered Agent and/or NEW Register	red Office address:		0
		1212 Enterprise Dr			
		NEW Registered Office Address:			
		Unit 7	<del>_</del>		
		Port Charlotte	FL_33953		
the age	cha ent w is/we	mited liability company is not organized under the nge or changes are made, the Florida street address fill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the second control of the control	of the registered liability company s of the limited li	office and the business office, it is hereby confirmed the ability company or as other	ce of the registered at the change(s)
		W.N.		Jose Marrero Martell	
	_	of a member or authorized representative of a member		Printed or typed name of:	_
pro the to	ovisi 2 obl. merc	by accept the appointment as registered agent and cons of all statutes relative to the proper and completed agent as provided in the proper and completed agent as provided reflect a change in the registered office address, I in writing of this change.	ele performance o ded för in Chaptè	of my duties, and I am famili or 605, F.S. Or, if this docu	ar with and accept ment is being filed
Si	gnaki	of Registered Agent			