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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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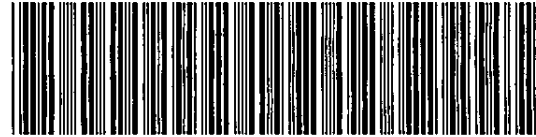
(Business Entity Name)

(Document Number)

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S. YOUNG

16 OCT 25 PM 4: 47

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** UNITED AUTO HOLDINGS, LLC

\_\_\_\_\_  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L16000122314

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

VICTOR LUCAS

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Name of Firm/Company

5400 S. UNIVERSITY DRIVE STE 214

\_\_\_\_\_  
Address

DAVIE, FL 33328

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY E ORTEGO ESQ

at ( 305 ) 643-6868

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**  
(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department  
of State is: UNITED AUTO HOLDINGS, LLC


2. The Florida document/registration number assigned to this limited liability company is:  
L16000122314

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/20/2016

4. I, VICTOR LUCAS, hereby withdraw/resign as a  
(Print Name of Person Resigning)

AUTHORIZED MEMBER  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my  
resignation in writing.

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required) ✓  
Certified Copy: \$30.00 (Optional)