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COVER LETTER

Division of Corporations	
British Imports of Broward, LLC SUBJECT:	
	ted Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to	o the following:
Erik Day	
Name of Person	
British Imports of Broward, LLC	
Firm/Company	
2300 NE 151st ST	
Address	
North Miami, FL 331%	
City/State and Zip Code	
eday@warrenhenryauto.com / jigonzalez@warrenhenryauto.c	om
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please cal	II:
Erik Day 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 following amount:	
■ \$25 Filing Fee	☐ \$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.

1.	Name of the limited liability company: British Imports o	of Browa	d, LLC	C	
2. (a	4651 Volunteer Road	ı	(b) 2300 NE 151st ST		
(-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Davie, FL 33330		No	orth Miami, FL 33181	
	07/01/2016		 L160	000126332	
3.	Date of filing/registration in Florida	- 4.		Document number	
5. (Legon Fodiman, P.A.				
J. (Registered Agent and Registered Office shown on the records of the Florida Dept. of State 3225 Aviation Ave			t. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Suite 301				
	Miami	33133			
(ł	Enter name of NEW Registered Agent and/or NEW Registered Office address:			FILED POSSESSED IS PH 2: 03 SECRETARY OF STATE SECRETARY OF STA	
	NEW Registered Office Address:	NEW Registered Office Address:			
	121 Alhambra Plaza, Suite 1505				
	Coral Gables, FI	L133134			
chan agen was/	e limited liability company is not organized under the la ge or changes are made, the Florida street address of the t will be identical. Or, in the case of a Florida limited li were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the	e registe lability of of the li	red of: ompai mited	fice and the business office of the registered iny, it is hereby confirmed that the change(s) liability company or as otherwise provided in	
		Er	ik Day	,	
_	nature of a member or authorized representative of a member			Printed or typed name of signee	
prov the o to me	reby accept the appointment as registered agent and agisions of all statutes relative to the proper and complete bligations of my position as registered agent as provide crely reflect a change in the registered office address, I led in writing of this shappe.	perforn d for in	iance Chapi	of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed	
Signa	ature of Registered Agent				