## 216000136918

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(Address)						
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D. SCOTT JUN 1 5 2017

COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: Brayder auto tec Name of Limited L	iability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and	fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	following:
SAMIRAY PORCOT  Name of Person	
Name of Person	
Firm/Company	
707 High Street	تاهنده بین نسب
Address	
West Palm Belich Fl 3340) City/State and Zip Code	13 LE
E-mail address: (to be used for future annual report notif	ication)
For further information concerning this matter, please call:	
Name of Person at (S6/	Area Code & Daytime Telephone Number
Registration Section Re Division of Corporations Division Building P.C 2661 Executive Center Circle Tallahassee, Florida 32301	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, Florida 32314
Enclosed is a check for the following amount:	

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

## 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.

I. Name of the limited liability company: BRAY (lein	Auto tects
2. (a) 707 High St	(b) 16 M OSCOCIO De Wost Kalm Gouch H
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
West Pal un Beach Fl	3360°
3340 <b>5</b>	
3. Date of filing/registration in Florida	L16000/36918
	4. Document number
5. (a) Eric Charles	
Registered Agent and Registered Office shown on the records of	•
15:140 (criple Blud	C C
Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)
/	TS T
Loxahatchee ,FL	- 33 <i>470</i> - 三
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:
in in the state of	Onice address:
Louise A. Nicolas S.	Amedy SE =
NEW Registered Office Address:	2 m 2 m
4884 Pineaire Ln	<del> </del>
West Palm Beach, FL	334.17-
If the limited liability company is not organized under the law the change or changes are made, the Florida street address of agent will be identical. Or, in the case of a Florida limited lia was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the	the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in
Coneda )	SAmedy Livered  Printed or typed name of signee
Signature of a member or authorized representative of a member	, ,,
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provided to merely reflect a change in the registered office address, I i notified in writing of this change.	vee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept d for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been
Signature of Registered Agent	
· Signature of Registered Agent	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

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1.	Na	me of the limited liability company: BRAYCLEIN	Huto	tec/2	·	
2 1		707 High St			Sceola D Was	+ del warmed it
(	,	Principal office address of limited liability company:	(0,		Mailing address of limite	
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POS	
		West Palm Broth FC	_		33609	
		3340 <b>5</b>	<del></del>	-	• • •	•
		07/24/2016		L 160	000/3691	8
3.		Date of filing/registration in Florida	4.	,	Document number	
5.	(a)	Erie Charles				
	•	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	- 3:	
		15440 Temple Blud			14	
		Registered Office Address MUST BE FLORIDA STREET	(DDRESS)		-	
		/			ەھمىي ر م⊷ د د	SEC SEC
		foxahatchee ,FL	334	<u> </u>	- []	用と用
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(	b)			_ <del></del>	-	in ω m
	(	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	ress:	<u>:</u>	
	\			;	;	
		Jourse A. Nicolas S.	711100	ly		
		NEW Registered Office Address:	•	/		
٠.		4884 Pineaire Ln	<u> </u>		٠.	
		West Palm Beach, FL	334	.17-		
1 <b>f</b> + L	o 12	mited liability company is not organized under the law	'		wide it is hamaker	nfirmed that after
the	cha	nge or changes are made, the Florida street address of	the regist	ered office	and the business of	fice of the registered
agei	at w	vill be identical. Or, in the case of a Florida limited lia	bility cor	npany, it is	s hereby confirmed t	hat the change(s)
was the	/we arti	re authorized by an affirmative vote of the members on clestof or anization or the operating agreement of the	t the 11m1 limited li	tea naomiy ability com	y company or as oth noanv.	erwise provided in
	==	Hart +				<del>/-</del> -
Si	gnat	ure of a member or authorized representative of a member		21111C	Printed or typed name	of signee
I he prov the d	ereb Visio Obli Vere	ly accept the appointment as registered agent and agrous of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the change in the registered office address.				=

Signature of Registered Agent