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(Re	(Requestor's Name)				
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COVER LETTER

TO:

INHS18 (2/14)

TO: Registration Section Division of Corporations			
SUBJECT: B&B Automotive, LLC		·	
Name	of Limited I.	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offic	e Change and	I fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the	following:	
Ben Beckmann			
Name of Person			
B&B Automotive, LLC			
Firm/Company			¥LL.
17617 Broadway Ave			AUG 13 PH 6: 4
Address			7 P
Fort Myers Beach, FL 33931			PH 6: 45
City/State and Zip Code			5 m
accounting@paradisecg.com			
E-mail address: (to be used for future annu	al report noti	fication)	
For further information concerning this matter, p	olease call:		
Ben Beckmann	239	314-8582	
Name of Person		Area Code & Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.	egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314	
Enclosed is a check for the following a	imount:		
\$25 Filing Fee	□ s	55 Filing Fee & Certified Copy	

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. Na	ame of the limited liability company: B&B Automo	tive, LL	С			
2. (a)	17617 Broadway Ave		(b) 16970 San Carlos Blvd Ste 160-237			
2. (4)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Fort Myers, FL 33908			
	08/22/16		L160001	59971		
3.5. (a)	Date of filing/registration in Florida Katrina Salokar Remove	4.		Document number		
()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 2805 18th St W			e:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES:	<u>S)</u>			
	Lehigh Acres, F	L33971		TALLAHA		
(b)	Ben Beckmann					
	Enter name of NEW Registered Agent and/or NEW Registere	d Office ad	ldress:			
	3702 37th St SW			.Q.E. 6.		
	NEW Registered Office Address;			- D. 55		
	Lehigh Acres, F	_{I.} 33976		-		
the cha agent v was/we	imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the reginability control of the lin	stered offic- ompany, it i nited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in		
	Bendl	Be	n Beckma			
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee		
provisi the obl to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and completing tions of my position as registered agent as providely reflect a change in the registered office address, I din writing of this change.	gree to ac e perform ed for in ' hereby c	t in this cap nance of my Chapter 603 confirm that	acity. I further agree to comply with the duties, and I am Jamiliar with and acceps, F.S. Or, if this document is being filed the limited liability company has been		

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

Signature of Registered Agent