

L16000 170034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

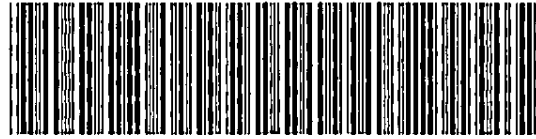
(Business Entity Name)

(Document Number)

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2019 MAR -6 PM 12:33
CLERK OF COURT

R0/ch8

MAR 11 2019

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAK TIRE CENTER 1 LLC

Name of Limited Liability 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:

MARCELO GUERREIRO

Name of Person

MAK TIRE CENTER 1 LLC

Firm/Company

6155 S. US HIGHWAY 17-92

Address

CASSELBERRY FL 32730

City/State and Zip Code

WSAID007@GMAIL.COM

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

For further information concerning this matter, please call:

WILSON SAID DE CARVALHO

Name of Person

407

at ()

695 5300

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

RECEIVED
MAR 06 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 27, 2019

MARCELO GUERREIRO
MAK TIRE CENTER 1 LLC
6155 S US HIGHWAY 17/92
CASSELBERRY, FL 32730

SUBJECT: MAK TIRE CENTER 1 LLC
Ref. Number: L16000170034

We have received your document for MAK TIRE CENTER 1 LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The document must also contain the address of the registered agent which must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 919A00004183

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: MAK TIRE CENTER 1 LLC
2. (a) 6155 S. US HIGHWAY 17-92 CASSELBERRY (b) 6155 S. US HIGHWAY 17-92 CASSELBERRY
Principal office address of limited liability company: FL 32730 Mailing address of limited liability company: FL 32730
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
3. 03/14/2018 4. L16000170034
Date of filing/registration in Florida Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
MARCELO GUERREIRO
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
14127 WARD ROAD
ORLANDO, FL 32824
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
DANIELA & SONS LLC
NEW Registered Office Address:
6155 S. US HIGHWAY 17-92
CASSELBERRY, FL 32730

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TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

DANIELA MOTT

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent