L17000045932

. (Requestor's Name)			
(Address)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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(Document Number)			
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COVER LETTER

TO: Registration Section Division of Corporations	
	tnc Vehicles LLC
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	er to the following:
Name of Person	
Exodus Holdings Car Firm/Company	aplic
1010 Paile Ct. G Un	u it
Safety Haibor, FL 3460 City/State and Zip Code	iS
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	call:
01/	Y
Name of Person	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 amou	nt:
\$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.

i. Na	me of the limited liability company: Smart	act Elec	Inc Vehicles, LC
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	245 10th AM. N.		245 1015 Ave. n
	Safety Harbor, FL 34695	5	afety Halbor, FL 34695
2	2/22/2017		L17000045932
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Joshua P. Hooks	EL 11 D	_
	Registered Agent and Registered Office shown on the records of the		ate:
	Registered Office Address (MUST BE FLORIDA STREET AD		
	Registered Office Address [MOST BE FLORIDA STREET AD	<u>////KESSI</u>	
			<u> </u>
	Tampa .FL	33635	
	Clas		
(b)	Clearwater Business 1		<u>-</u>
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	mice address:	
	1799 n. Belcher Rd.		
	NEW Registered Office Address:		_
	Suit B		
			_
	Clearwater FL	33745	_
lf the li	mited liability company is not organized under the laws	of the State of F	Florida it is hereby confirmed that after
the char	nge or changes are made, the Florida street address of the	ne registered offi	ce and the business office of the registered
was/we	ill be identical. Or, in the case of a Florida limited liab a authorized by an affirmative vote of the members of	the limited liabil	ity company or as otherwise provided in
the arti	les of organization or the operating agreement of the li	mited liability co	ompany.
Signat	un of a member or authorized representative of a member		Printed or typed name of signee
I hereb	whereast the appointment as registered agent and garage	e to act in this co	macity. I further garee to comply with the
provision the oblination mere notified	is its of all statules relative to the proper and complete positions of my position as registered agent as provided it is reflect a change in the registered office address. I he is in writing of this change.	erformance of m for in Chapter 60 reby confirm tha	y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed 11 the limited liability company has been
C.or	of Bosins of Asset		
Pikuatut	e of Registered Agent		