L17000061850

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP		MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

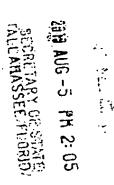
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COVER LETTER

TO: Registration Section Division of Corporations	
The Car Connect LLC SUBJECT:	
	mited Liability Company
Dear Sir or Madam:	\$ 55. \$ 5.55.
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	r to the following:
Richard C Kelly	
Name of Person	
The Car Connect LLC	
Firm/Company	
1711 N Dale Mabry Hwy	
Address	
Lutz, FL 33548	
City/State and Zip Code	 -
thecarconnect@icloud.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	call:
Richard C Kelly	995-1169
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 amoun	ıt:
☑ \$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. Na	ame of the limited liability company: The Car Co	nnect L	LC
2. (a)	The Car Connect LLC	ı	(b) The Car Connect LLC
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited hability company: (Note: MAY BE POST OFFICE BOX)
	1711 N Dale Mabry Hwy		5429 Lookout Pass
	Lutz, FL 33548		Wesley Chapel, FL 33544
	03/17/2017		L17000061850
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Richard C Kelly		
()	Registered Agent and Registered Office shown on the records Richard C Kelly	of the Flori	·
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	SS)
	3632 Land O Lakes Blvd Suite 106		
	Land O Lakes	FL	SECRETARY OF SECRET
(b)	Richard C Kelly		Reg 7
	Enter name of NEW Registered Agent and/or NEW Register	ed Office 2	address:
	Richard C Kelly		Em 6
	NEW Registered Office Address:		
•	5429 Lookout Pass	- .	
	Wesley Chapel	_{FL} 3354	4

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.

Richard C Kelly

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 of Registered Agent

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