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## COYER LETTER

TO: Registration Section Division of Corporations			
RAMIREZ AUTO REPAIR LLC			
SUBJECT: Name of L	imited Liability Company		
Dear Sir or Madam;			
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for fifing.		
Please return all correspondence concerning this matt	ter to the following:		
JSOE R RAMIREZ			
Name of Person			
Firm/Company			
1802 5TH STREET W			
Address			
BRADENTON, FL 34205			
City/State and Zip Code			
E-mail address: (to be used for future annual rep	port notification)		
For further information concerning this matter, please	e call:		
JOSE R. RAMIREZ	941 224-1674		
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	int:		
S25 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	une of the limited liability company: RAMIREZ AU	ITO REF	PAIR LL	_C	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*/		Mailing address of lit	mited liability company: POST OFFICE BOX)
	1802 5TH STREET W		1802 5	TH STREET W	·
	BRADENTON, FL 34205	_	BRADE	ENTON, FL 342	<del></del>
		_			
	05/24/2017	l	17000	114800	
3.	Date of filing/registration in Florida	4.		Document numb	ner
5. (a)	JOSE R RAMIREZ				
. (u)	Registered Agent and Registered Office shown on the records of t	he Florida !	Jept. of St	ute:	
	JOSE R RAMIREZ				
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)			
	2803 MOCCASIN WALLOW RD				22年
	PALMETTO, FL 34221, FL				17 JUL 12
(b)					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> .				
	NEW Registered Office Address:				
	1802 5TH STREET W				
				<del></del>	
	BRADENTON , FL	34205			
the cha agent v was/w	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of the organization of the operating agreement of the	vs of the S the regist ability con of the limi	ered offi npany, it ted liabil	ice and the busines i is hereby confirm lity company or as	is office of the registered and that the change(s)
01	vee //hamlet	JOS	JOSE R. RAMIREZ		
Signa	ture of a member of authorized representative of a member			Printed or typed na	ime of signee
provisi the obj to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered affice address. If in writing of this change.	ee to act performa i for in C lievely co.	in this ca nce of m hapter 60 njirm tha	ipacity. I further a v duties, and I am 05, F.S. Or, if this it the limited liabil	igree to comply with the familiar with and accept document is being filed ity company has been
4	in flametal				
Xiggati	re of Registered Agent				

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