118000077855

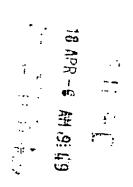
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certificates of S	Status				
Special Instructions to Filing Officer:					
	i				
	(Address) (Address) (City/State/Zip/Phone #) WAIT (Business Entity Name) (Document Number) Certificates of				

Office Use Only



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Y SULKER APR 0 9 2018

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: AMPS Cars, LLC					
N	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning	this matter to the following:				
Amilkar Perez Santiesteban					
Name of Person					
AMPS Cars LLC					
Firm/Company					
501 South State Rd 7					
Address	· ····································				
Plantation, FL 33317					
City/State and Zip Code					
ampscarsfl@gmail.com					
E-mail address: (to be used for future a	nnual report notification)				
For further information concerning this matter	er, please call:				
Amilkar Perez Santiesteban	954 484-1198at ()				
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	ng amount:				
□ \$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	me of the limited liability company:			
2.	(a)		(b)	
	、 /	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)	`	,	Mailing address of limited liability company: (Note: M.4Y BE POST OFFICE BOX)
		501 South State Rd 7			501 S State Rd 7
		Plantation, FL 33317			Plantation, FL 33317
		03/27/2018		L	.18000077855
3.		Date of filing/registration in Florida	4.	_	Document number
5	(a)	Amilkar Perez Santiesteban			
J.	(4)	Registered Agent and Registered Office shown on the records of 501 NE 5 Terr #429	the Florid	ia I	Dept. of State:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
					78
		Fort Lauderdale , FI	33301		4/PP
	(b)	Ricky Osborne			
	(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		ress:	
		4000 North State Rd 7		6.4	
	NEW Registered Office Address:				
					
		Plantation	33317	, 	
the age wa	cha ent w s/wc	mited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited literally an affirmative vote of the members of organization or the operating agreement of the	f the regi lability c of the lin	ist on nit	ered office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
				kar Perez Santiesteban	
	/ .	yfe of a member or authorized representative of a member			Printed or typed name of signee
pro the to i	ovisi obli mere	oy accept the appointment as registered agent and agons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I I'in writing of this change.	ree to ac perform d for in hereby c	nai Cl Cor	n this capacity. I further agree to comply with the uce of my duties, and I am familiar with and accept uapter 605, F.S. Or, if this document is being filed ufirm that the limited liability company has been
Sir	natu	re of Registered Agent			