

L18000087755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

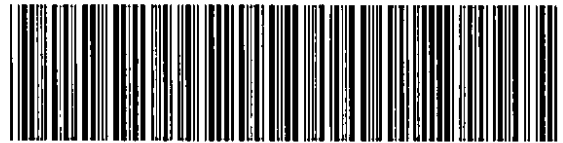
(Business Entity Name)

(Document Number)

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2018 SEP 14 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. MILLIGAN

SEP 15 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 4, 2018

MR KIA AUTO SALES, LLC
ATTN: MERCEDES NODARSE
19501 SW 129 CT
MIAMI, FL 33177

SUBJECT: MR KIA AUTO SALES, LLC
Ref. Number: L18000087755

We have received your document for MR KIA AUTO SALES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Partnership, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

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) 245-6051.

Michelle Milligan
Senior Section Administrator

Letter Number: 818A00018260

2018 SEP 14 AM 10:33

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mr KIA AUTO SALES 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:

MERCEDES NODARSE
Name of Person

Mr KIA AUTO SALES LLC
Firm/Company

19501 SW 129 CT
Address

MIAMI, FL 33177
City/State and Zip Code

MRKIA228@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MERCEDES NODARSE at (786) 269 8851
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 amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: MR KIA AUTOSALES LLC
2. (a) 19501 SW 129 CT MIAMI FL 33177 19501 SW 129 CT MIAMI, FL 33177
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. _____ Date of filing/registration in Florida 4. L18000087755 Document number

5. (a) RENIEL NODARSE
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
19501 SW 129 CT MIAMI, FL 33177
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

- _____ , FL 33177
- (b) MERCEDES NODARSE
Enter name of NEW Registered Agent and/or NEW Registered Office address:
19501 SW 129 CT
MIAMI , FL 33177
NEW Registered Office Address:

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.

M. Nodarse
Signature of a member or authorized representative of a member

MERCEDES NODARSE
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.

M. Nodarse
Signature of Registered Agent