

L19000045248

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

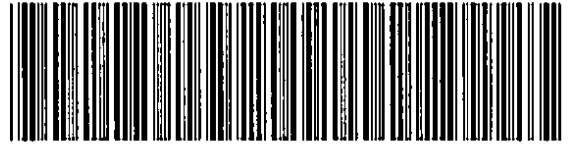
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COVER LETTER

TO: Registration Section
Division of Corporations

South Florida Sports Cars, LLC

SUBJECT: _____
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:

Alfred A. LaSorte, Jr.

Name of Person

South Florida Sports Cars, LLC

Firm/Company

1118 25th Street, Unit 24

Address

West Palm Beach, FL 33407

City/State and Zip Code

al@sflsportscars.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alfred A. LaSorte, Jr.

561

252-0909

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020-08-26 13:00

August 26, 2020

ALFRED A. LASORTE, JR.
SOUTH FLORIDA SPORTS CARS, LLC
1118 25TH ST., UNIT 24
WEST PALM BEACH, FL 33407

SUBJECT: SOUTH FLORIDA SPORTS CARS, LLC
Ref. Number: L19000045248

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE SECTIONS 2 (A) AND (B), SECTIONS 3, 4 AND 5(A) OF THE DOCUMENT.

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) 245-6050.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 720A00016326

Please see attached revised form. Thank you!

Al La Sorte
561-252-0909

**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.

South Florida Sports Cars, L.L.C.

1. Name of the limited liability company: _____

2. (a) 1118 25th St. #24 (b) same

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

West Palm Beach, FL
33407

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

3. Date of filing/registration in Florida

4. Document number

5. (a)

Alfred A. La Sorte
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1118 25th St., Unit 24
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

West Palm Beach, FL 33401
FL

(b)

Alfred A. La Sorte
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

290 N Olive Ave, #308

West Palm Beach

33401

FL

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.

Al La Sorte
Signature of a member or authorized representative of a member

Alfred A. La Sorte, Jr.
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.

Al La Sorte
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00