120000073974

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





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VS 10/14/20

COVER LETTER

TO:	Registration Section Division of Corporations	♥.	· · · · · · · · · · · · · · · · · · ·				
SHRH	Ferguson Biggs Auto Mechanics	LLC					
SUBJECT: Name of Limited Liability Company							
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered (Office Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning	this matter to the	following:				
Brittan	y Corbell - Madison						
_	Name of Person						
Fergus	on Biggs Auto Mechanics						
	Firm/Company		_				
1250 E	Blvd. ast Hallandale Beach Suite 607						
	Address						
Hallan	dale Beach FL, 33009						
	City/State and Zip Coc	le	· 				
P.T.L.	Enterprise20@gmail.com						
	E-mail address: (to be used for future	annual report notif	fication)				
For fu	rther information concerning this ma	tter, please call:					
Brittar	ny Corbett - Madison	786 at (868-9978				
	Name of Person		Area Code & Daytime Telephone Number				
	Mailing Address:		Street Address:				
	Registration Section		Registration Section				
	Division of Corporations		Division of Corporations				
P.O. Box 6327			The Centre of Tallahassee				
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the follow	ving amount:	,				
	■ \$25 Filing Fec		\$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.

i. N	ame of the limited liability company: Ferguson Biggs A	Auto M	lecha	nic	
2 (a)			(b)		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	N	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	874 SW 10TH DRAPT 108			874 SW 107	ΓH DRAPT 108
	POMPANO BEACH, FL 33060			POMPANO) BEACH, FL 33060
	03/05/2020		I	.2000007391	74
3.	Date of filing/registration in Florida	_ 4.	-		Document number
5 (6)					
5. (a)	Registered Agent and Registered Office shown on the records of	the Flo	orida	Dept. of State	5
	Ferguson, George			•	
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS		
	874 SW 10TH DRAPT 108				
	POMPANO BEACH , FI	L 3306	0		
	, , , , , , , , , , , , , , , , , , , ,				•
(b)			<u> </u>		
	Enter name of NEW Registered Agent and/or NEW Registered	<u>d Offic</u>	e add	ress:	
	Brittany Corbett - Madison				
	NEW Registered Office Address:				-
	1250 East Hallandale Beach Blvd. Suite 607				
	Hallandale Beach Blvd.	, 3300)9		
	, 1	L			-
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e registiability of the	stere y cor limi	d office and npany, it is ited liability ability com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Sign	ature of a member or authorized representative of a member	•			Printed or typed name of signee
provi the ol to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	ree to e perfo ed for hereb	act orma in C oy co	in this capa nce of my a hapter 605, nfirm that t	ncity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
Signa	ture of Registered Agent				

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