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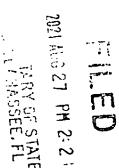
(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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COVER LETTER

10;		tration Section ion of Corporations					
SUBJE	CT:	DORAL AUTO GROUP, LLC					
	_	Name of Limited Liability Company					
Dear Sir	or M	adam:					
The enc	losed .	Registered Agent/Registered Office Change	and fee(s) are submitted for filing.				
Please re	eturn (all correspondence concerning this matter to	the following:				
Cheryl V	Vilke						
		Name of Person					
Lewis Bi	risbois						
		Firm/Company					
110 S.E.	6th Sti	reet, Suite 2600					
		Address	 ,				
Fort Lau	derdale	e. Florida 33301					
		City/State and Zip Code					
Cheryl, W	/ilke@	lewisbrisbois.com					
E-r	nail ac	ldress: (to be used for future annual report r	notification)				
For furth	er info	ormation concerning this matter, please call	:				
CH	91	Name of Person	Area Code & Daytime Telephone Number				
† 1 †	Regist Divisi P.O. B	ng Address: ration Section on of Corporations Box 6327 assee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, F1, 32303				
ŀ	Enclos	ed is a check for the following amount:					

☐ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

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:DORAL AU	TO GR	OUI	P. LLC	
2.	(a)	21400 N.W. 2ND AVE MIAMI GARDENS, FL 33169		(b	21400 N	.W. 2ND AVE MIAMI GARDENS, FL 33169
	(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.		08/10/2020 Date of filing/registration in Florida	— —	-	L2000023	
<i>5</i> .		Andrew S. Brown, Esq.	4.			Document number
(b)		Registered Agent and Registered Office shown on the records of 20950 NW 2ND AVE Miami Gardens, FL 33169 Registered Office Address (MUST BE FLORIDA STREET)	nte:			
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	2021 AUG 27			
		Cheryl Wilke				G 27 PH
		NEW Registered Office Address: 110 S.E. 6th Street, Suite 2600				PH 2: 2:1 ASSEE, FL
		Fort Lauderdale	33301 L)		
age was the	inge ont we slive artic ignate ereh visid obli nere ified	mited liability company is not organized under the la or changes are made, the Florida street address of the or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited lifter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the are of a member or authorized representative of a member of all stanties relative to the proper and complete actions of all stanties relative to the proper and complete actions of my position as registered agent as provide if reflect a change in the registered office address. It is writing of this change.	e regist lability of the I limite	tered cor limi ed lia ustir	d office ar npany, it i ted liabili ability cor n Dash	of the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany. Printed or typed name of signce
Sig	natur	e of Registered Agent				