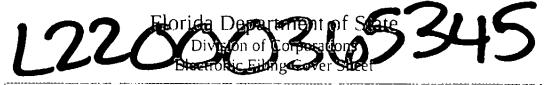
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE DSK AUTO, LLC

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY . $\bullet$

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. N	ame of the limited liability company: Dsk Auto LLC		
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	08/19/22		22000365345
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	INC AUTHORITY RA		
	Registered Agent and Registered Office shown on the records of	of the Florida D	Pept, of State
	390 NORTH ORANGE AVE., STE 2300-N	····	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	ORLANDO	FI 32210	•
(b)	Registered Agents Inc		2023 AUG
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> 7901 4th St N	<u>ed Office addr</u>	See -3 Figure 13 Figure 1
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	FL	
the chagent was/w the art	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registe liability com s of the limit	ered office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in bility company.
Signs	dure of a member or authorized representative of a member	<del></del>	Printed or typed name of signee
I here provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple- ligations of my position as registered agent as provide ely reflect a change in the registered office address, d in writing of this change.	te performan ded for in Ch I hereby con	r this capacity. I further agree to comply with the use of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
$\underline{\hspace{1cm}}$	David Roberts - Assistant	Secretary	