

L23000 219 SSI

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

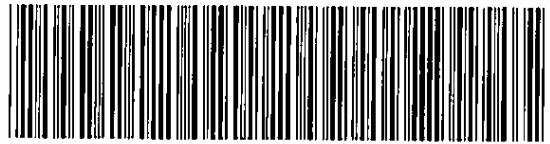
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL
2021 JUL 11 PM 1:46

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Driving Force Autos 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:

Darin Wade Mellinger, Esquire
Name of Person

Mellinger LLP
Firm/Company

1200 North Federal Highway, Suite 300
Address

Boca Raton, Florida 33432
City/State and Zip Code

steven@profusionventures.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Darin Wade Mellinger, Esquire at (561) 210-8570
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

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SECRETARY OF STATE
TALLAHASSEE, FL
1000

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: Driving Force Autos LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
 735 West Broward Boulevard
 Fort Lauderdale, Florida 33312

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
 405 Northeast 2nd Street, PH 5
 Fort Lauderdale, Florida 33301

3. 05/03/2023 Date of filing/registration in Florida

4. 123000219551 Document number

5. (a) Christopher Finley, Esquire
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
 160 Southeast 6th Avenue, #B-2

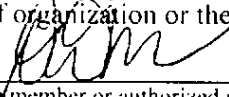
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
 Delray Beach, FL 33483

(b) Darin Wade Mellinger, Esquire
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
 1200 North Federal Highway, Suite 300
 Boca Raton, FL 33432

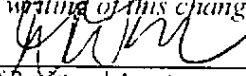
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 SECRETARY OF STATE
 TALLAHASSEE, FL

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.


 Signature of a member or authorized representative of a member

Darin Wade Mellinger
 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.


 Signature of Registered Agent