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Division of Corporations

Plotting Department of State

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	10.	Division of	Corporations		_
			: (850)617-6383		
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## LLC REGISTERED AGENT CHANGE BIJ MOTORS CORAL GABLES, LLC

Certificate of Status	0
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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
erib fi	BU Motors Coral Gables, LLC		
31/00	ECT:	Name of Limited	Liability Company
Dear S	ir or Madam:		
The er	closed Registered Agent/Registered	Office Change a	nd fee(s) are submitted for filing.
Please	return all correspondence concerning	this matter to th	ne following:
Alex F	Kurkin, Esq.		
	Name of Person		and the second s
Kurkir	Forehand Brandes LLP		
	Firm/Company		· <b></b> ·-
18851	NE 29th Ave., Suite 303		
	Address	. /	• • • • • • • • • • • • • • • • • • • •
Avent	ura, FL 33180		
	City/State and Zip Cou	le	
akurki	n@kfb-law.ocm		
	E-mail address: (to be used for future	annual report no	tification)
For fo	rther information concerning this mat	tter, please call:	
Alex l	Curkin	305 at (_	929-8500
	Name of Person	ai (	Area Code & Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations The Centre of Tallahassee
	P.O. Box 6327		2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32314		Tallahassee, FL 32303
	Enclosed is a check for the follow	ring amount:	
	\$25 Filing Fee	ت	\$55 Filing Fee & Certified Copy
INHS	18 (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.

1.	Na	une of the limited liability company:	I Gables, LLC					
		100 Almeira Ave	(b)  Mailing address of limited liability company  (Note: MAY BE POST OFFICE BOX)  Coral Gables, FL 33134					
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  Coral Gubles, FL 33134						
3.	(a)	5/31/2023  Date of filing/registration in Florida  Northwest Registered Agent LLC		Document number				
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 7901 4th Street N. Street, St. Petersburg, FL 33702						
		Registered Office Address (MUST RE FLORIDA STREET		TITULE TO THE				
		, Fi						
		Alex Kurkin, Esq.						
	(b)	Enter name of NEW Registered Agent and/or NEW Registere						
		c/o Kwkin Forchand Brandes LLP		.*				
		NEW Registered Office Address:						
		18851 NE 29th Ave., Suite 303						
		Aventura, FL , F	L					
ch ag w th	iange cnt as/w e art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited let authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered of lability comp of the limited e limited liab	any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in ility company.				
	Signa	Source of a member of authorized representative of a member		Gregory W. Barnes Printed or typed name of signee				
I pr th	here rovis e ob mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providedly reflect a change in the registered office address. It is a more than the change of the change.	ree to act in e performanc ed for in Cha hereby confi	this capacity. I further agree to comply with the e of my duties, and I am Jamiliar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been				
Š	Signature of Registered Agent							