LZ3 000 313 768

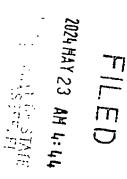
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



300430065323

31/2./24 -61017 -31. **29.10





Barbara Cavicchia, Paralegal Direct Dial: 314-333-3836 bcavicchia@spencerfane.com File No. 5023952-0002

May 21, 2024

VIA FEDEX

Florida Secretary of State
Division of Corporations, Registration Section
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Euro Car and Truck

To Whom It May Concern:

Enclosed please find two copies of the Statement of Change of Registered Office or Registered Agent or Both for a Limited Liability Company form. The \$25 filing fee is also enclosed. Please use the additional copy to file stamp and return it in the self-addressed postage prepaid envelope.

Should you have any questions, please call me at 314-333-3836.

Sincerely,

Barbara Cavicchia

Barb Carriclio

BC/ema Enclosures

COVER LETTER

TO: Registration Section Division of Corporations		
Division of Corporations		
SUBJECT: Euro Cars and Truck		
•	Name of Limited Li	ability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Regist	ered Office Change and	fee(s) are submitted for filing.
Please return all correspondence conce	erning this matter to the	following:
Barb Cavicchia		
Name of Pers	on	
Spencer Fane	•	
Firm/Compan	ıy	_
1 N. Brentwood Blvd., Suite 1200		
Address		_
St. Louis, MO 63105	- Code	<u> </u>
City/State and Zip	p Code	
zaworski1@yahoo.com		
E-mail address: (to be used for fi	uture annual report notif	cation)
For further information concerning thi	s matter, please call:	
Barb Cavicchia		
	at (<u>314</u>) 333-3836
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	i	The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
!		Tallahassee, FL 32303
		•
Enclosed is a check for the f	ollowing amount:	
△ \$25 Filing Fee	□ \$:	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 60 \$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	me of the limited liability company: Euro Cars a	and Trucks	, LLC
2	(a)	Euro Cars and Trucks, LLC	(b)	Euro Cars and Trucks, LLC
	(~)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(5)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		6976 Sea Daisy Drive		6976 Sea Daisy Drive
		Lantana, FL 33462	- .	Lantana, FL 33462
		06/30/2023		L23000313768
3.		Date of filing/registration in Florida	4.	Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Spensery, Inc.				Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				202
		201 North Franklin Street, Suite 2150		
		Tampa , FL	3360	2024 HAY 23
	α.s			Sic 🛌 📺
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		ROBERT ZAWORSKI		+
		NEW Registered Office Address:		
		6976 SEA DAISY DRIVE		
		LANTANA , FL	33462	
ehage was the	ange ent w is/we arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liar authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ws of the S registered ability com of the limit limited lia	State of Florida, it is hereby confirmed that after the loffice and the business office of the registered apany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company. Robert Zaworski
	Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
pre the to	ovisi 2 obl merc	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I is more interest of the property of this change.	ee to act in performand for in Ch hereby con	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed afirm that the limited liability company has been
Si	enatu	re of Registered Agent		

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