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COVER LETTER

SUBJECT:				CARS, LLC.
	Name or	Dimited L	lability	Company
Dear Sir or Madam:				
The enclosed Registered A	gent/Registered (Office Cha	ange an	d fee(s) are submitted for filing
Please return all correspon	dence concerning	this matt	er to the	e following:
	N D. GRUSS			
GRUSS	8 & CO., INC.			
Firm/	Company			
777 SOUTH FLAG	LER DRIVE, ST	E. 801-E		
\	dress			
WEST PALM	BEACH, FL 334	401		
	and Zip Code			
BL@G E-mail address: (to be used fo	RUSS.COM			
E-mail address: (to be used for	or future annual report r	otification)		
For further information con	ncerning this matt	er, please	call:	·
MARTIN D. G	RUSS	at (5	561)	515-6464
Name of Persor	l			a Code & Daytime Telephone Number
STREET/COURIE	R ADDRESS:		MAIL	ING ADDRESS:
Registration Section Reg			ration Section	
Division of Corporat	ions	Division of Corporations		
Clifton Building				ox 6327
2661 Executive Cent Tallahassee, Florida			Tallaha	assee, Florida 32314
Enclosed is a chec	k for the followi	ng amour	ıt:	
\$25 Filing Fee		Г	│\$55 F	Filing Fee & Certified Copy

TO: Registration Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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:	PEGASUS CLASSIC CARS, LLC.
2. (a) Principal office address of limited liability of	company: MARTIN D. GRUSS
(Note: MUST BE STREET ADDRESS)	777 S. FLAGLER DR., STE. 801-E WEST PALM BEACH, FL 33401
(b) Mailing address of limited liability compan	y: MARTIN D. GRUSS
(Note: MAY BE POST OFFICE BOX)	777 S. FLAGLER DR., STE. 801-E WEST PALM BEACH, FL 33401
04/11/2008	M0800001754
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sh	own on the records of the Florida Dept. of State:
Registered Agent:	NATIONAL CORPORATE RESEARCH
Registered Office Address:	515 EAST PARK AVENUE
	TALLAHASSEE, FLORIDA 32301
(b) Enter name of <u>NEW Registered Agent</u> and <u>NEW Registered Agent</u> :	NEW Registered Office address: Martin D. Gruss
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES	777 S. Flagler Dr.
Signature of a member or authorized representative of a member MARTIN D. GRUSS Printed or typed name of signee	der the laws of the State of Florida, it is hereby le, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization company. Int and agree to act in this capacity. Further agree to the proper and complete performance of my duties, of my position as registered agent as provided for in the did not of the proper and complete performance of the provided for in the did not provided for i
Signature of Registered Agent	_

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

INHS18 (05/08)