

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)694-1639

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

Ema I Address:

LLC REGISTERED AGENT CHANGE NNN CA AUTO SVC LLC

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Corporate Filing Menu

Help

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

1. The name of the limited liability company is: NNN C	A Auto Svc ELC
2. (a) Principal office address of the limited liability comapny:	450 S ORANGE AVE
Note: MUS [BE STREET ADDRESS)	STE 900
ACC. 1100 DEGTREET HOURISON	Orange FL 32801
(b) I lailing address of limited liability company:	450 \$ ORANGE AVE
Note: MAY BE POST OFFICE BOX	STE 900
	Orange FL 32801
<u> </u>	M09000001870
3. Date of filing/regi: tration in Florida	4. Document number
5.(a) Figistered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	C T CORPORATION SYSTEM
Registered Office Address:	
·	1200 SOUTH PINE ISLAND ROAD
	PLANTATION FL 33324
(b) Enter name of NEW Registered Agent and/or NEW Re	edistered Office address:
(b) there takes to the vertice and the term	
NEW Regist ared Agent:	Corporate Creations Network Inc.
NEW Registered Office Address:	11380 Prosperity Farms Road #221E
(MUST BE FLORIDA STREET ADDRESS)	
	Palm Beach Gordens FL 33410- C
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 diagram 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 opposition of the limited liability company. Signature of a member or authorized representative of a member)	
by Sar annah Mor talban as Attorney-in-Fact (Printed or Typed name of signee)	
I hereb accept the a pointment as registered agent and agree t	o 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
In the rightiged offic address, I hereby confirm that the limited	F.S. Or, if this document is being filed to merely reflect a change liability company has been notified in writing of this change.
(Signati, pof Registere Agent) By: Savannah Montalban, Spe Division of Corporations, P.O. B	ox 6327, Tallahassee, FL 32314
INH5(8(-)/99)	
Corporate Creation a international Inc.	
11380 Prosperity F irms Road #2216 Palm Beach Garde is FL 33410 (551) 634-8107	