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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: September 25, 2017

Order#: 831163-088

Re: STEVE MOORE CHEVROLET DELRAY, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Mary Rivers c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA. XCOA

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. 1	Name of the limited liability company: STEVE MOORE CHEVROLET DELRAY, LLC			
2. (a)			
`	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	1111 LINTON BOULEVARD	200 SW 1ST AVE	200 SW 1ST AVE. 14TH FLOOR	
	DELRAY FL 33444	FT. LAUDERDAL	E, FL 33301	
	09/14/1999	M9900001438		
3.	Date of filing/registration in Florida	4. Docume	ent number	
5. (a) BETHEL, ALISON E			
. (·	Registered Agent and Registered Office shown on the records	of the Florida Dept, of State:		
			•)	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		1 T	
	200 SW 1ST AVENUE 14TH FLOOR		THE SEP 26 MILLINES	
	FORT LAUDERDALE	TL 33301	76 LT	
(b)			三 三	
	,		-	
	Enter name of NEW Registered Agent and/or NEW Register	ed Office address:	<u> </u>	
	1201 Hays Street		De	
	NEW Registered Office Address:			
	Tallahassee	FL 32301		
the cagen	e limited liability company is not organized under the hange or changes are made, the Florida street address t will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the memberaticles of organization or the operating agreement of the	aws of the State of Florida, it is of the registered office and the liability company, it is hereby s of the limited liability compa	e business office of the registered confirmed that the change(s)	
	/S/ JAMES BENDER	JAMES BENDER, MAN	IAGER	
Sig	nature of a member or authorized representative of a member	Printed o	or typed name of signee	
prov the o to m	reby accept the appointment as registered agent and a isions of all statutes relative to the proper and comple bligations of my position as registered agent as provide the property reflect a change in the registered office address, and in writing of this change.	gree to act in this capacity. I fee performance of my duties, a led for in Chapter 605, F.S. C I hereby confirm that the limit	further agree to comply with the ind I am familiar with and accept Or, if this document is being filed ted liability company has been	
Sign	Inoza C-Kubi Hure of Registered Agent Corporation Service Company	BY: Grace E. Kirby, Ass	st. Vice President	

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