

P05000011181

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

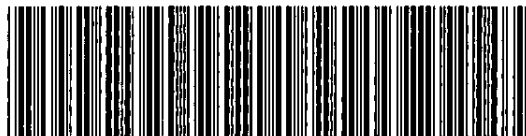
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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change

06/22/09--01038--013 **35.00

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2009 JUL -7 AM 9:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AOR
7/8/09

*00789, 00524, 00709, 00772



**FLORIDA DEPARTMENT OF STATE
Division of Corporations**

June 24, 2009

Girgis M. Beskalis
G&M Auto Inc
795 N. Courtney Pkwy
Merritt Island, FL 32953

SUBJECT: G&M AUTO, INC.
Ref. Number: P05000011181

We have received your document for G&M AUTO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form that you submitted is incorrect. It is for an alien business organization and your entity is a domestic Florida corporation. I have enclosed the correct form that you may fill out and return to us.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist !!

Letter Number: 809A00021625

RECEIVED
2009 JUL -7 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: G & m Auto inc
Name of Corporation

DOCUMENT NUMBER: PO 50000 11181

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Girgis m. Beskalis
Name of Contact Person

G & m Auto inc
Firm/Company

795 N. Courtney Pkwy
Address

Merritt Island FL 32953
City/State and Zip Code

G Beskalis @ G mail . Com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Girgis Beskalis at (321) 453 3950
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: G & M Auto Inc
2. The principal office address: 795 N. Courtney Pkwy
Merritt Island FL 32953
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/9/05 Document number: P05000011181

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Corporation Service Company
1201 Hayes Street
Tallahassee FL 32301 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Girgis Beskalis
795 N. Courtney Pkwy
Merritt Island FL 32953

P.O. Box NOT acceptable

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUL -7 AM 9:03

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]

Signature of an officer or director

Girgis Beskalis

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to 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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

6-29-09

Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)