

PO10000043629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

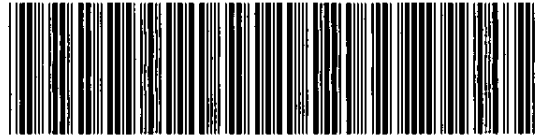
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Special Instructions to Filing Officer:

Corrected document
by telephone call
on 4/7/09

Office Use Only



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03/26/09--01013--023 **35.00

RA to city

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 APR -7 PM 2:30

FILED

APR 07 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 30, 2009

ARTURO IBERICO
C & I AUTO SALES INC.
4701 SW 45TH ST BLDG 11 BAY 6
DAVIE, FL 33314

SUBJECT: C & I AUTO SALES, INC.
Ref. Number: P01000043629

We have received your document for C & I AUTO SALES, 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):

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 309A00010522

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR - 7 AM 8:00

RECEIVED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: C & I Auto Sales Inc.
(Name of Corporation)

DOCUMENT NUMBER: PO1000043629

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:

Arturo Iberico
(Name of Contact Person)

C & I Auto Sales Inc.
(Firm/Company)

4701 SW 45th St. Bldg 11 Box 6, Davie FL 33314
(Address)

Davie FL 33314
(City/State and Zip Code)

For further information concerning this matter, please call:

Martha Jarquin at (954) 678-7746
(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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: C & I Auto Sales, Inc.
2. The principal office address: 4701 SW 45th St. Bldg 11 Bay 6
Davie, FL 33314
3. The mailing address (if different): 6460 French Angel Terr.
Margate, FL 33063
4. Date of incorporation/qualification: 4/30/01 Document number: P01000043629
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)
Terencio Bodden
506 NW 87 Ave.
Miami, FL 33172

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

Martha Tarquin, Pres, owner
4701 SW 45th St Bldg 11 Bay 6
(P.O. Box NOT acceptable)
Davie, FL 33314

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)

Arturo Iberico Officer/Director
(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.

Martha Tarquin
(Signature of Registered Agent)

3/23/09
(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)

FILED
09 APR - 7 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA