oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P10000100548 Entity Name: TRICOLOR AUTO & BODY, INC

Current Principal Place of Business:

6525 SOUTHERN BLVD BAY 13 WEST PALM BEACH, FL 33413

Current Mailing Address:

6525 SOUTHERN BLVD **BAY 13** WEST PALM BEACH, FL 33413

FEI Number: 27-4324133

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

RUA, OSCAR 239 PINEHOB CIRCLE B2 GREENACRES, FL 33463 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Officer/Director Detail :			
Title	Р	Title	Т
Name	RUA, OSCAR	Name	RESTREPO, NIDIA
Address	239 PINEHOB CIRCLE #B2	Address	104 PIMLICO WAY
City-State-Zip:	GREENACRES FL 33463	City-State-Zip:	WELLINGTON FL 33411

Certificate of Status Desired: No

SIGNATURE: OSCAR RUA PRESIDENT

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under

03/09/2019

Date

FILED Mar 09, 2019 Secretary of State 0885795051CC

Date