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(Requestor's Name) (Address)	600102061956
(City/State/Zip/Phone #) City/State/Zip/Phone #) MAIL Gusiness Entity Name)	05/11/0701002003 **35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 07 HAY I I PH 2: 44 SECRETARY OF STATE TALLAHASSEE, FLORID
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

# SUBJECT: INDUSTRIAL METAL SPRAYING, INC.

(Name of Corporation)

# DOCUMENT NUMBER: 567517

43

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:

#### ROSA LUGO

(Name of Contact Person)

INDUSTRIAL METAL SPRAYING (Firm/Company)

1705 W. 32ND PLACE

(Address)

### HIALEAH FL 33012

(City/State and Zip Code)

For further information concerning this matter, please call:

MANUEL CRESPO ESQ.	at (	000	630-9966 X-207
(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

1. The name of the corporation: INDUSTRIAL METAL SPRAYING, INC.

2. The principal office address: 411 W 28TH ST HIALEAH FL 33010

3. The mailing address (if different): 1705 W 32 PLACE HIALEAH FL 33012

- 4. Date of incorporation/qualification: 04-03-1978 Document number: 567517
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

### STANLEY KOTLER

1705 W 32 PLACE

HIALEAH FL 33012

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

MANUEL L. CRESPO ESQ

10765 SW 104 ST

(P.O. Box NOT acceptable)

MIAMI FL 33134

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.

officer or director

GUILLERMO LUGO

04-30-07

(Printed or typed name and title)

(Date)

I hereby accept the approximate as registered agent and agree to act in this capacity. I further agree to doubly with the provisions of all statutes relative to the proper and complete performance of my duties, and I fun familiar with and accept the obligation of my position as registered agent. Or, if this document is beingfiled merely to reflect a change in the registered office address, I hereby confirm that the corporation has then notified in writing of this change.

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)

