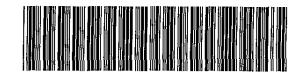
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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: V.I.P. Auto Sales, Inc.
(Name of corporation)
DOCUMENT NUMBER: 571597
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:
Jeffrey R. Ludwig, Esq.
(Name of person)
Ludwig & Bunn, P.A. (Name of firm/company)
(Name of http://company)
5150 Belfort Road S., Bldg. 500 (Address)
(ridicos)
Jacksonville, FL 32256
(City/state and zip code)
For further information concerning this matter, please call:
Toffice Division and Color
(Area code & dayanie tereprone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Emerosed is a \$55.00 cheek made payable to the Department of State.
Mailing Address: Street Address:
Amendment Section Division of Corporations Amendment Section Division of Corporations
P.O. Box 6327 409 E. Gaines Street
Tallahassee, FL 32314 Tallahassee, FL 32399

TO: Amendment Section

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

Pursuant to the	e provisions of se	ctions 607.0502, (517.0502, 607.150	8, or 617.1508	8, Florida Statutes,
this statement o	of change is submi	tted for a corporat	ion organized unde	er the laws of t	he State of
Florida	in order to	change its registe	ered office or regis	itered agent, o	r both, in the State
of Florida.			_		2000
1. The name of	the corporation:_	V.I.P. Auto	Sales, Inc.		- (2) 3
2. The principa	d office address:	5936 Phillip	s Highway	=	
	·	Jacksonville	e, FL 32216		AC T
3. The mailing	address (if differen	nt):			
					. <u>Er</u>
4. Date of inco	rporation/qualifica	tion: <u>05/10/19</u>	Docum	ent number: _	571597
	nd street address of artment of State:	the current registe	ered agent and regis	stered office or	n file with the
	Jeffrev	R. Ludwig, P.	A. =		
•	6620_Sou	thpoint Drive	. South, Suite	200	
	Jacksony	111e, FL 32210	6		
6. The name a	nd street address	of the new registe	ered agent (if chan	ged) and /or r	registered office (if
changed):		R. Ludwig, Es			
	Ludwig &	Bunn, P.A.			<u></u>
		fort Road S.,			₹ <u>.</u>
	T1	•	ailbox NOT acceptable)		
•	Jacksonv	ille, FL 32256			
The street addragent, as chang	ess of its registere sed will be identica	d office and the st	reet address of the	business offic	e of its registered
Such change wanthorized by t	as authorized by r he board, or the co	esolution duly ado orporation has bee	opted by its board on notified in writing	of directors or ug of the chang	by an officer so ge.
mark.	r, chairman or vice chairm	an of the board!	Marilyn S1 (Printed or	uder, Pres	ident
I hereby accept I further agree performance of registered ager	t the appointment to comply with the fmy duties, and I dut. Or, if this docu	as registered ager e provisions of all am familiar with a ment is being file	at and agree to act statutes relative to and accept the oblided merely to reflect on has been notified	in this capacito the proper an gation of my p a change in th	ty. nd complete ossition as se registered
	Signature of Registered A	nt)		(Date)	
If signing on behal	If of an entity: Bunn P.	Q .	Presiden	A	
	Typed or Printed Name)			(Capacity)	

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