

F04000000700

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H16000181486 3)))



H160001814863ABC2

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
INTERAMERICAN MOTOR CORPORATION**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

RA CH

Electronic Filing Menu

Corporate Filing Menu

Help

### COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Interamerican Motor Corporation  
Name of Corporation

DOCUMENT NUMBER: F04000000700

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:

Patrick Johnson  
Name of Contact Person

Interamerican Motor Corporation  
Firm/Company

PO Box 2198, Dept. 8088  
Address

Memphis, TN 38101  
City/State and Zip Code

patrick.johnson@autozone.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patrick Johnson at 901 495-6500  
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

CR2E045 (03/12)

**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: INTERAMERICAN MOTOR CORPORATION
2. The principal office address: 8901 CANOGA AVE., CANOGA PARK, CA 91304
3. The mailing address (if different): PO BOX 2198, DEPT 8088, MEMPHIS, TN 38101
4. Date of incorporation/qualification: 01/30/2004 Document number: F04000000700
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)

CAPITOL CORPORATE SERVICES, INC.

155 OFFICE PLAZA DRIVE - STE. A

TALLAHASSEE, FL 32301

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

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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 of an officer or director

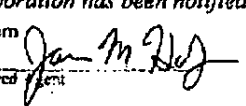
THOMAS A. KLIMAN, VICE PRESIDENT, TAX

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.

By: C T Corporation System

Signature of Registered Agent

  
Signature of Registered Agent

07/27/2016

Date

If signing on behalf of an entity: James M. Halpin  
Assistant Secretary

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 (03/12)