

# Florida Department of State Division of Corporations Public Access System

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Division of Corporations

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Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone

: (305)672-0686

Fax Number

: (305)672-9110

### REGISTERED AGENT CHANGE

#### SATRAX MOTOR COMPANY

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

Pursuant to the provisions of section 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 is: Satrax Motor Compa	ny
2. The principal office address: 2875 S. ORANGE AV	/E., SUITE 500
3. The mailing address (if different):	
	Document Number: F06000003287
4. Date of incorporation/qualification: 5/5/2006	
5. The name and street address of the current registered Florida Department of State:	agent and registered office on the Min file
TRACY A. MARSHALL	
301 E. PINE ST., SUITE 1400	
ORLANDO FL 32801	
6. The name and street address of the new registered ag (if changed):	ent (if changed) and /or registered office
Corporate Creations Network Inc.	
11380 Prosperity Farms Road #221E	
(P.O. Box Not acceptable Palm Beach Gardens FL 33410	e)
The street address of its registered office and the streagent, as changed will be identical.  Such change was authorized by resolution duly adopanthorized by the board, or the corporation has been not	ated by its board of directors or by an officer so
(Significate of an officer or director)	Clancey S. Tucker by N. Pasquier as attorney-in-fact (Printed or Typed name and title)
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all performance of my duties, and I am familiar with and a agent. Or, if this document is being filed merely to rehereby confirm that the corporation has been notified in Signature of Registered Agent.	d agree to act in this capacity.  I statutes relative to the proper and complete incomplete incomplete in the obligation of my position as registered effect a change in the registered office address, I
If signing on behalf of an entity	` '
Maria Areiza, Assistant Secretary  (Typed or Printed Name)	
	FLORIDA DEPARTMENT OF STATE , P.O. BÖX 6327, TALLAHASSEE, FL 32314
Corporate Creations International Inc. 941 Fourth Street Miami Beach FL 33139	CONTROL OF THE SERVICE OF THE SERVIC
(305) 872-0688	25 <b>&amp;</b> 77

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