

F10000000367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** C&M Associates, Inc. dba Traffic and Revenue Associates, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F10000000367

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:

Alireza Soroush

Name of Contact Person

C&M Associates, Inc. dba Traffic and Revenue Associates, Inc.  
Firm/Company

121 S. Orange Avenue, Suite 1500

Address

Orlando FL 32801

City/State and Zip Code

asoroush@candm-assoicates.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL

For further information concerning this matter, please call:

Alireza Soroush

Name of Contact Person

at ( 407 ) 574-4544 ext. 405

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

RE: Traffic and Revenue Associates, Inc. /Letter Number: 214A00023190

Diane,

Thank you for your letter. I filled out the correct form and attached it to this note. I called the number you provided to confirm the sufficiency of the money we have in the file you before and it is confirmed that the money (\$43.75) is sufficient for the filing fee.

Additionally, I was informed that we can use the remainder of the money to receive a Certificate of Good Standing. Therefore, I would like to also request a Certificate of Good Standing. Please let me know if you have any questions.

Thanks,

Alireza Soroush

121 S Orange Avenue, Suite 1500

Orlando, Florida 32801

Tel: 407.574.4544 Ext: 425

E-mail: [asoroush@candm-associates.com](mailto:asoroush@candm-associates.com)

Webpage: [www.candm-associates.com](http://www.candm-associates.com)

RECEIVED  
14 NOV 17 PM 4:28  
TRAFFIC AND REVENUE ASSOCIATES, INC.  
121 S ORANGE AVENUE, SUITE 1500  
ORLANDO, FL 32801  
407.574.4544



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 29, 2014

ALIREZA SOROUGH  
C&M ASSOCIATES, INC.  
121 S. ORANGE AVENUE, SUITE 1500  
ORLANDO, FL 32801

SUBJECT: TRAFFIC AND REVENUE ASSOCIATES, INC.  
Ref. Number: F10000000367

We have received your document for TRAFFIC AND REVENUE ASSOCIATES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong registered agent change form. You are filed as a foreign corporation in our office not an alien business organization. Please complete the attached form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 214A00023190

**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 Texas in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: C&M Associates, Inc. dba Traffic and Revenue Associates, Inc.
2. The principal office address: 15770 Dallas Parkway, Suite 870, Dallas, TX 75248
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/22/2010 Document number: F10000000367
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)

Vargas, Herbert E  
12507 N.W. 18th Manor

Pembroke Pines, FL 33028

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

Alireza Soroush


121 S. Orange Avenue, Suite 1500

P.O. Box NOT acceptable

Orlando FL 32801

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

Carlos M. Contreras, President

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.*

  
\_\_\_\_\_  
Signature of Registered Agent

11/12/2014  
\_\_\_\_\_  
Date

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 (03/12)

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