## F12000004165

(F	Requestor's Name)	
( <i>P</i>	Address)	
( <i>F</i>	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
([	Ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	
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SECRETARY OF STATE OF

RD/Change (10.20.14

## COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT. ATLAS EXPRESS PADALA, INC.

Name of Corporation

OCUMENT NUMBER: F12000004765

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:

FELSIE A. LONGARES

Name of Contact Person

ATLAS EXPRESS PADALA, INC.

Firm/Company

13460 CENTRAL AVENUE, SUITE I

Address

CHINO, CA 91710

City/State and Zip Code

hq@axpgroup.com

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

For further information concerning this matter, please call:

Felsie A. Longares

,909 (464

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



October 9, 2014

FELSIE A. LONGARES ATLAS EXPRESS PADALA INC 13460 CENTRAL AVENUE - STE. 1 CHINO, CA 91710

SUBJECT: ATLAS EXPRESS PADALA INC.

Ref. Number: F12000004765

We have received your document for ATLAS EXPRESS PADALA INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

You failed to list the current and new registered agent name.

The registered agent must sign accepting the designation.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 714A00021662

## 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 FLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ATLAS EXPRESS PADALA, INC.
2. The principal office address: 6593 POWERS AVENUE, SUITE # 4  JACKSONVILLE, FL 32217
3. The mailing address (if different): 13460 CENTRAL AVENUE, SUITE I CHINO, CA 91710
4. Date of incorporation/qualification: 11/26/2012 Document number: F12000004765
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State (If recimed enter resigned)  Secus Chuz Sontos  Chuz Sont
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  FELSIE A. LONGARES, CFO  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.  9/25/2014
Signature of registered Agent  Date  If signing on behalf of an entity
JOEL P. LONGARES Typed or Printed Name

1772

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