F18000004920

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
, , , , ,					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					

Office Use Only



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SECRETARY OF STATE
TALL ARACSELS TATE



2804 Gateway Oaks Drive #100 Sacramento, CA 95833 Phone (800)533-7272 Fax (800)603-5868 REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

Date: June 10, 2021

4947

Cori Ann Crosthwaite AE:

TO:

Florida Division of Corporations

REFERENCE:

1598834

THE CENTRE OF TALLAHASSEE

2415 N. MONROE STREET, SUITE 810

TALLAHASSEE, FL 32303

FAX:

PLEASE PERFORM THE FOLLOWING:

CAR BODY LAB INC

Change of Registered Agent

IN: FL

SPECIAL INSTRUCTIONS:

PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Cori Ann Crosthwaite TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #100 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)533-7272

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

statement of ch	provisions of sections 607.0502, 617, ange is submitted for a corporation or er to change its registered office or reg	ganized under the laws of the State of	DE	this ———	
1. The name of	the corporation: Car Body Lab Inc				
	l office address: 429 Lenox Ave MIAM	I BEACH, FL 33139			
3. The mailing	address (if different):				
	rporation/qualification: 10/18/2018				
5. The name ar	d street address of the current registerent artment of State: (If resigned, enter resi	ed agent and registered office on file w			
	JOUDET, RUDOLPHE				
	429 Lenox Ave	5	ZUZI SEC	2021	
	MIAMI BEACH, FL 33139	7	2021 JUN 15 SECRETARY		
6. The name an (if changed):	d street address of the new registered a	agent (if changed) and /or registered of	E PER		
	Rocket Lawyer Corporate Services LL	C	9: 5		
	155 Office Plaza Drive, 1st Floor				
	P.O Tallahassee, FL 32301	. Box NOΓ acceptable	_		
The street addras changed wil	ress of its registered office and the str I be identical.	eet address of the business office of i	its register	red agent	
Such change wanthorized by t	ras authorized by resolution duly ado he board, or the corporation has been	pted by its board of directors or by an inotified in writing of the change.	i officer s	O	
Rudy Joudst Signatury fran Sieer or director		Rudolphe Jou	Rudolphe Joudet / CEO		
Signature of an efficer or director		Printed or typed name and t	Printed or typed name and title		
I further agree of my duties, a document is be	t the appointment as registered agent to comply with the provisions of all s ad I am familiar with and accept the ing filed merely to reflect a change it s been notified in writing of this chan	statutes relative to the proper and cor obligation of my position as registere 1 the registered office address, I here	mplete per ed agent, eby confiri	rformanc Or, if thi in thát the	
Palma Mens		6/10/2021			
Si	gnature of Registered Agent	Date			
	chalf of an entity:				
	y, Asst. Secretary Rock Typed or Printed Name	et Lawyer Corporate Sei	rvices	LLC	
'		FEE: \$35.00 * * *			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 cr2e045 (04/13)