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COVER LETTER

TO:

Amendment Section
Division of Corporations

SUBJECT. Business Relocation

Name of Corporation

DOCUMENT NUMBER: Internal Engine Parts Group, Inc

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:

Maria McGee

Name of Contact Person

Internal Engine Parts Group, Inc

Firm/Company

P.O. Box 2958

Address

Meridian, MS 39302

City/State and Zip Code

mmcgee@internalengineparts.com

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

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For further information concerning this matter, please call:

Maria McGee

_{at (}bU1)b

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes ange is submitted for a corporation organized under the laws of the State of Mississi Mississi Control of Mississi M	ppi	-
	er to change its registered office or registered agent, or both, in the State of Florida. the corporation: Internal Engine Parts Group, Inc		
2. The principa	l office address: 1001 1st Ave East, Meridian MS 39301		
3. The mailing	address (if different): P.O. Box 2958 Meridian, MS 39302		
4. Date of incor	poration/qualification: 11/21/74 Document number: F98000000	195	
5. The name and	d street address of the current registered agent and registered office on file with the urtment of State: (If resigned, enter resigned)		
	Agent:Antonio Jr Juncal		<u>-</u> ;
	Agent add:9836 Currie Davis Drive-Tampa, FL 33619	17	SE(V)(SI
	registered office address: 9836 Currie Davis Drive, Tampa FL 33619	7 HAY 17	0 NO
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	PH 2:	RY OF STA
	Agent address: 328 South Falkenburg Road- Tampa, FL 33619	58	SHOLL
	P.O. Box NOT acceptable New Office address:328 South Falkenburg Road- Tampa, FL 33619		
The street address changed will	ess of its registered office and the street address of the business office of its registe be identical.	red ager	nt,
_	as authorized by resolution duly adopted by its board of directors or by an officer she board, or the corporation has been notified in writing of the change.	50 ^	
	Manuficer or director Christopha D. Was Printed ordyped name and title	<u>ns lei</u>	1
I hereby accept I further agree performance of agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change.	stered ss, I	
Sign	mature of Registered Age/ti Date		
1 1	half of an entity:		
XA HNIO	MIO JUCA I JC		

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