H81947

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filirg Officer: AUTHORIZATION BY PHONE TO Change RA to are permé Address ENTRE 12/4/15

Office Use Only



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COVER LETTER

10: Amendment Section Division of Corporations
SUBJECT: Kuhn's Auto Service Inc (Name of Corporation)
DOCUMENT NUMBER: H81947
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:
TAMRA + George Kuhn (Name of Contact Person)
Mailing: POBox 749 (Firm/Company) Edgewater Fr 32132-0749 Aysical: 4130 SR 44 (Address)
Mailing: POBOX 149
Edgewater to 32132-0749
Physical: 4130 SR 44 (Address)
New Smyrna Boh FL 32168 (City/State and Zip Code)
For further information concerning this matter, please call:
Tamra Kuhn at (386) 689 1665 (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

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, t		
statement of change is submitted for a corporation organized under the laws of the State of Flori	<u>طم</u>	
in order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: Kuhn's Auto Service, Inc.		
2. The principal office address: 4130 SR 44		
New Smyrna Beh FZ 32168		
3. The mailing address (if different): Po Box 749		-
Edgewater FZ 32132-0749	<u> </u>	
4. Date of incorporation/qualification: 10115/85 Document number: H81947		·
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	-	
GEORGE W. KUHN, SR. & TAMRA L.S. KUHN		9
2205 C. CI PMOCE DO LD	05	SE
2295 S. GLENCOE ROAD	8	- 오유
NEW SMYRNA BEACH, FL 32168	1	유로
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	is Ka	
GEORGE W. KUHN, SR.	Ö	
4130 SR 44		** **********************************
NEW SMYRNA BEACH, FL 32168		<u></u>
The street address of its registered office and the street address of the business office of its register as changed will be identical.	red ag	gent,
Such change was authorized by resolution duly adopted by its board of directors or by an officer s-authorized by the board, or the corporation has been notified in writing of the change.	0	
(Signature of an officer or director) Tamea L.S. Kuhn V (Printed or typed name and title)	1-F) <u>< S</u>
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 per of my duties, and I am familiar with and accept the obligation of my position as registered agent. document is being filed merely to reflect a change in the registered office address, I hereby confirmation has been notified in writing of this change.	rform Or, i n tha	ance f this t the
X) Jan & 11 28 2005 (Signature of Registered Agent) (Date)		_
If signing on behalf of an entity:		
George W. Kuhn Sr. (Typed or Printed Name)		

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