P0000057898

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

Office Use Only



000106905270

07/31/07--01054--004 **35.00

2007 JUL 31 PM 4: 00

Cs 8/1/07

COVER LETTER

TO:	: Amendment Section Division of Corporations				
SUBJ	BJECT: COMPLETE DISCOUNT AUTO REPAIR INC (Name of Corporation)	· · · · · · · · · · · · · · · · · · ·			
DOCU	CUMENT NUMBER: P00000057898				
	e enclosed Statement of Change of Registered Office/Agent and fee	are submitted for filing.			
Please	ase return all correspondence concerning this matter to the following	g:			
	SERGE FAUVET (Name of Contact Person)	·····			
COMPLETE DISCOUNT AUTO REPAIR INC. (Firm/Company)					
19144 SR 44 (Address)					
EUSTIS, FL 32726					
	(City/State and Zip Code)				
For fu	further information concerning this matter, please call:				
SERC	RGE FAUVET at (352 (Name of Contact Person) (Area Co	de & Daytime Telephone Number)			
Enclos	closed is a \$35.00 check made payable to the Department of State.				
	Division of Corporations P.O. Box 6327 Cliff Tallahassee, FL 32314 2661	et Address: endment Section sion of Corporations on Building Executive Center Circle ahassee, FL 32301			

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

statement of ch	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this shange is submitted for a corporation organized under the laws of the State of FLORIDA	
	der to change its registered office or registered agent, or both, in the State of Florida.	
	of the corporation: COMPLETE DISCOUNT AUTO REPAIR, INC.	
2. The principa	pal office address: 19144 SR 44 EUSTIS, FLORIDA 32726	
3. The mailing	g address (if different):	
4. Date of inco	orporation/qualification: JUNE 2000 Document number: P00000057898	
	and street address of the current registered agent and registered office on file with the partment of State:	
	SERGE FAUVET	
	1406 4TH ST. N.	
	ST PETERSBURG,FLORIDA 33704	
6. The name ar (if changed)	and street address of the new registered agent (if changed) and /or registered office):	밀
	SERGE FAUVET	DIVISION OF CORPUS
	19144 SR 44	S CF
	(P.O. Box NOT acceptable) EUSTIS, FL 32726	ORPO
The street add as changed wi	SERGE FAUVET 19144 SR 44 (P.O. Box NOT acceptable) EUSTIS, FL 32726 dress of its registered office and the street address of the business office of its registered agent, rill be identical.	4 4: 00
Such change vauthorized by	was authorized by resolution duly adopted by its board of directors or by an officer so the board, of the corporation has been notified in writing of the change.	
(97.45)	My PAR. Jarge FAUVET PRES. (Printed or typed name and title)	
I hereby accept further agree of my duties, a document is b	pt the appointment as registered agent and agree to act in this capacity, be to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this being filed merely to reflect a change in the registered office address, I hereby confirm that the has been notified in writing of this change.	e s ?
-4	(Signature of Registered Agent) (Date)	
	behalf of an entity:	
 	(Typed or Printed Name)	

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