P00000080980

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
. (Cit	:y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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RAChanse Theris 8-19-08

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: MULINIX AUTO BODY, INC.				
(Name of Cor	poration)			
DOCUMENT NUMBER: POOOOO080980				
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:				
"'''	•			
JUAN J. PEREZ (Name of Contact Person)				
(Name of Cont.	act reison)			
JUAN J. PEREZ & ASSOCIATES, P.A.				
(Firm/Con	ipany)			
8569 PINES BOULEVARD, SUIT				
(Address)				
PEMBROKE PINES, FLORIDA 330	024			
(City/State and Zip Code)				
For further information concerning this matter, please cal	П:			
JUAN J. PEREZ (Name of Contact Person)	at (954) 450-2585 (Area Code & Daytime Telephone Number)			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
broissed is a \$35.00 check made payable to the Department of State.				
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

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

statement of change is submitted for a corporation organized under the laws of in order to change its registered office or registered agent, or both, in	the State of FLORIDA
The name of the corporation: MULINIX AUTO BODY, INC.	
2. The principal office address: 1394 NW 65TH WAY, PLANTATION, FLORIDA	A 33313
3. The mailing address (if different): SAME	
4. Date of incorporation/qualification: 08/22/2000 Document numb	er: P00000080980
5. The name and street address of the current registered agent and registered off Florida Department of State:	ice on file with the
RONALD K. MULINIX	ينو
1394 NW 65TH WAY	
PLANTATION, FLORIDA 33313	
6. The name and street address of the new registered agent (if changed) and /or (if changed):	registered office
JUAN J. PEREZ & ASSOCIATES, P.A.	37
8569 PINES BOULEVARD, SUITE #216 (P.O. Box NOT acceptable)	
PEMBROKE PINES, FLORIDA 33024	
The street address of its registered office and the street address of the business as changed will be identical.	ss office of its registered agent,
Such change was authorized by resolution duly adopted by its board of direct authorized by the board, or the corporation has been notified in writing of the	tors or by an officer so e change.
MIGUEL BRICEN (Printed or	O, DIRECTOR typed name and title)
I hexeby accept the appointment as registered agent and agree to act in this I further agree to comply with the provisions of all statutes relative to the proof my duties, and I am familiar with and accept the obligation of my position document is being filed merely to reflect a change in the registered office adcorporation has been notified in writing of this change.	capacity, oper and complete performance as registered agent. Or, if this dress, I hereby confirm that the
08/01/2008	
(Signature of Registered Agent) If signing on behalf of an entity:	(Date)
JUAN J. PEREZ, ESQ. (Typed or Printed Name)	

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