

P010000092737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

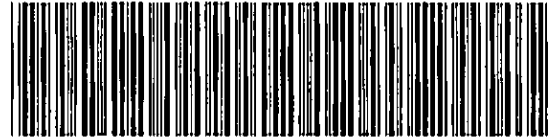
(Business Entity Name)

(Document Number)

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SECURITY  
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I ALBRITTON

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Joe's Auto Repair Corp  
Name of Corporation

DOCUMENT NUMBER: P010000092737

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:

ANA S Delgado  
Name of Contact Person

Joe's Auto Repair Corp  
Firm/Company

2600 S Sanford Ave  
Address

Sanford FL 32773  
City/State and Zip Code

Yourgbbiz@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANA Delgado at (407) 969 9088  
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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Soe's Auto Repair corp
2. The principal office address: 2600 S Sanford Ave  
Sanford FL 32773
3. The mailing address (if different): 177 E Grand Bend Ave  
Lake Mary FL 32746
4. Date of incorporation/qualification: 11/25/15 Document number: PO1000092737
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Roberto Delgado (Deceased)

177 GRAND BEND  
LAKE MARY, FL 32746

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ANA Delgado (widow)

2600 S Sanford Ave

P.O. Box NOT acceptable

Sanford FL 32773

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
Signature of an officer or director

Rosita Delgado  
Printed or typed name and title

*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 performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

[Signature]  
Signature of Registered Agent

12-19-18  
Date

If signing on behalf of an entity:

ANA S Delgado  
Typed or Printed Name

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