## P03000141417.

(F	Requestor's Name)	
(A	Address)	
<u>م)</u>	Address)	
(C	City/State/Zip/Phone #)	
		MAIL
(E	Business Entity Name)	<u> </u>
(Document Number)		
Certified Copies	Certificates of Status	·
<u></u>	<u></u>	
Special Instructions t	o Filing Officer:	
l		
	Office Use Only	

700059723397

1997) A. Gan (2007) - 6098 - 4400 - 70

FILED 05 SEP 19 AN 7:56 SECRETARY OF STATE FALLAHASSEE FLORIDA 1111



-

## **COVER LETTER**

Amendment Section TO: **Division of Corporations** ND Enterprise Group, Inc. (Name of Corporation) SUBJECT: P03000141417 DOCUMENT NUMBER: 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: Name of Contact Person) TUNE and Lube (Firm/Company) All Tune & Lube #2334 5301 S. US Hwy. 1 Fort Pierce, FL 34982 5301 US 1 (Address) (772) 464-4847 REG #MV-53362 34982 Pitae, Fl. (City/State and Zip Code) For further information concerning this matter, please call:

<u>Bill</u> Wahl at <u>772</u> <u>464-4847</u> (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 in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: 1.17 2. The principal office address: 3. The mailing address (if different); 10300014141 0 4. Date of incorporation/qualification: Document number: 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (cmpqn 4 S SEP 6. The name and street address of the new registered agent (if changed) and /or registered office 6 (if changed): 3 <u>---</u>i 50 (P.O. Box NOT scorptable) 34982 Crie

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.

liam rector

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 of Registered Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)