## P04000072161

(Re	equestor's Name)	***************************************
(Ad	ldress)	<u></u>
(Ad	ldress)	
(Cit	by/State/Zip/Phono	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	



100039859581

08/09/04--01022--021 \*\*35.00

OLANG-9 AM 9: 59
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Office Use Only



## **COVER LETTER**

10:	Division of Corporations					
SUBJE	CCT:	Compare Auto				
		(Name of co	rporation	1)	1	
DOCU	MENT NUMBER:	P0a0000	72161	- ;-		
The en	closed Statement of Change o	f Registered Office	/Agent a	nd fee a	re submitted for filing.	
	return all correspondence con					
		Sorena To				
		(Name of con	tact perso	on)		•
		Compare A		<b>#2</b>		
		(Firm/Co	mpany)			
		3477 Fo	wler St.			
	_ <del></del>	(Addı	ress)			
		Ft. Myers,	FL. 3390	31		
		(City/state ar	nd zip co	de)		
For fur	ther information concerning t	his matter, please c	all:			
	Sorena Torrealb	а	at f	305	724-8783	
<del></del>	(Name of contact per	son)	αι ( <u>₹</u> Α	rea cod	724-8783 e & daytime telephone number	)
	•					
Enclos	ed is a \$35.00 check made pa	yable to the Depart	ment of S	State.		
	Mailing Ad	l <u>dress:</u>		Street	Address:	
	Amendmen	t Section		Amen	dment Section	
	P.O. Box 63	Corporations 327		409 E.	on of Corporations Gaines Street	
	Tallahassee,	,FL 32314		i allah	assee, FL 32399	

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

statement of chan	rovisions of sections 6 ge is submitted for a c to change its registere	orporation organi	zed under the law	s of the State of _	Florida			
1. The name of th	e corporation:	Cor	mpare Auto Inc. #	12	•			
2. The principal o	-	3477 Fowler ST Ft. Myers, FL. 33901						
3. The mailing ad	dress (if different):	<del></del>	mpare Auto Inc. #	<del> </del>				
		347	77 Fowler St. Ft.	Fowler St. Ft. Myers, FL. 33901				
4. Date of incorpo	oration/qualification:_	05/03/2004	Document n	umber:	P04000072161			
5. The name and : Florida Depart	street address of the coment of State:	urrent registered ag	gent and registered	office on file wit	h the			
		Noel Remy			* +FC =			
<del>-</del>		6941 Carlyle Av	e #201		题里 小			
•		Miami Beach, F	L. 33141		題。「			
6. The name and (if changed):	street address of the n	ew registered agen	t (if changed) and	or registered offi	RY OF ST			
		Sorena Torrealb	a		9			
_		3477 Fowler ST			-			
	<b>(P</b> :	O. Box NOT acceptable)			· · · · · · · · · · · · · · · · ·			
-		Ft. Myers, FL. 3	3901	<u> </u>	- <sub> </sub> ⊭			
The street address as changed will be	s of its registered off be identical.	ice and the street	address of the bu	siness office of it	s registered agent,			
Such change was authorized by the	s authorized by resolute board, or the corpor	ution duly adopted ration has been no	I by its board of c tified in writing o	irectors or by an of the change.	officer so			
4. (Signatur	e of an officer of director)	<del>*</del> ·	× Sofe	NA TORRES	LBA SD			
I hereby accept to I further agree to of my duties, and document is being corporation has	the appointment as re o comply with the pro i I am familiar with a ne filed merely to refl been notified in writi	egistered agent an ovisions of all stat ma accept the obl ect a change in th ing of this change	d agree to act in utes relative to th igation of my pos e registered offic	this capacity. e proper and con ition as registere e address, I herel	uplete performance d agent. Or, if this by confirm that the			
+	-		*	8-3-04				
(Signing on bel	nature of Registered Agent) nalf of an entity:			(Date)				
+ 9014	·	LBA						

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