P04000151627

(Red	questor's Name)	
(Address)		
(Address)		
(City	//State/Zip/Phone	· #)
_		
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to F		
opeoid: matricularia to 1	iling Officer.	
•		
	•	





600139413276

01/05/09--01052--014 **35.00

SECRETARY OF STATE ALLAHASSEE, FLORID,

9 JAN -5 AM IO: 36

R.A. Change

1-13-19

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Indoor Auto Sales, Inc.	
(Name of Co	orporation)
DOCUMENT NUMBER: P04000151627	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Micha (Name of Cor	el Kraus
(Name of Con	itact rerson)
Michael I	Kraus, PA
(Firm/Co	ompany)
400 Fifth Avenue	e South, Suite 200
(Add	ress)
Naples (City/State or	s, FL 34102 nd Zip Code)
, ,	•
For further information concerning this matter, please c	call:
Michael Kraus	at (239) 262-1979
(Name of Contact Person)	at (<u>239</u>) <u>262-1979</u> (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Depart	ment of State.
Mailing Address: Amendment Section	Street Address: 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

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: Indoor Auto Sales, Inc.
2. The principal office address: 2372 Davis Boulevard, Naples, FL 34104
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/04/2004 Document number: P04000151627
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)
Frederick C. Kramer
950 North Collier Boulevard, Suite 201
Marco Island, FL 34145 Marco Island, FL 34145
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Michael L. Kraus, PA.
400 Fifth Avenue South, Suite 200 (P.O. Box NOT acceptable)
Naples, FL 34102
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.
James J. Divita. President (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 of Registered Agent) 12/30/2008 (Date)
If signing on behalf of an entity:
Michael L. Kraus, PA (Typed or Printed Name)

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