P05000025943

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

Office Use Only



200247074632

04/23/13--01012--018 **35.00

FILED

RECRETARY OF STATE
SECRETARY OF STATE

APR 2.6 7013
T. LEMIEUX

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BELL AEROMUTIVE INC Name of Corporation
DOCUMENT NUMBER: PO 5 0000 25943
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 Bell AEROMOTIVE INC Firm/Company 448 Lufbery Circle Address Williamson, GA 30292 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (678) 688 1179 Area Code & Daytime Telephone Number
Traine of contact reison Area code & Daytine relephone rumber

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 26, 2013

LOUIS BELL 448 LUFBERG CIR WILLIAMSON, GA 30292

SUBJECT: BELL AEROMOTIVE, INC.

Ref. Number: P05000025943

We have received your document for BELL AEROMOTIVE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

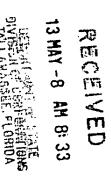
The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 013A00010123



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 FL
in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: $Be-LL A \in \mathcal{ROMOTIVE} INC$
2. The principal office address: 448 hwhery Cucle Williamson GA 30292
3. The mailing address (if different):
4. Date of incorporation/qualification: 2/18/2005 Document number: P050000 2594 3
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)
Registered Agent Solutions INC
Registered Agent Johnsons INC 155 OFFICE PLAZA DV Suite A TALLAHASSE FL 32301 PS =
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DIANE BELL 33232 WINDY OAK Str. P.O. BOX NOT acceptable Sorrento FL 3230/
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 of an other or director 1 Printed or typed name and title Owner
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.
When the Signature of Registered Agent 5-4-2013 Date
If signing on behalf of an entity:
DIANE M Bell

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

Typed or Printed Name