## P05000098364

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
<b>(</b> Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
• •		

Office Use Only



300221167163

02/14/12--01004--007 \*\*35.00

2012 FEB IL AMII: 47 SECRETARY OF STATE TALLAHASSEE. FLORID.

R.A.

FEB 1 6 2012 T. BROWN

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Address Change - Garage Floor 1 INC.  Name of Corporation
DOCUMENT NUMBER: PO SOOOO 9 8 3 6 4
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:
Gerald Sheehan Name of Contact Person
Garage Floor 1 INC. Firm/Company
New-Address 10565 N.W. 53rd Street
Sunrise FL 33357 City/State and Zip Code
Terry & GF1 Florida. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Terry Sheehan at (954) 384-3017 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

## ATEMENT 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: Garage Floor 1Inc.
2. The principal office address: 10565 NW 53rd Street, Sunrise FL 3335
3. The mailing address (if different):
4. Date of incorporation/qualification: 7/12/2005 Document number: PO 500009 8 364
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) Garald B Shouhan  740 SW 158 Lane
Sunrise FL 33326  FALTANASS  TALER TO THE TO THE TO THE TALE TO THE TO T
6. The name and street address of the new registered agent (if changed) and /or registered office. (if changed): Address Change:  New-Address 10-565 NW 5-3-69- Street
Suningen Fe 33'5'5'1
P.O. Box NOT acceptable
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 officer or director  Gently B Sheehan  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.
$m{arkappa}$
Signature of Registered Agent Date
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