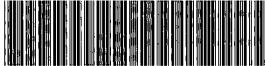
Do6000010468

(Requestor's Name)	
(Address)	20018
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	08/23/10-
(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Ame Divi	endment Section ision of Corporations						
SUBJECT:	Ed Aco						
	Name o	f Corporation					
DOCUMEN	NT NUMBER: PO	6000010468					
The enclosed	d Statement of Change of Registered Of	fice/Agent and fee ar	e submitted for filing.				
Please return	all correspondence concerning this ma	tter to the following:					
	Ed Acosta						
	Name of	Contact Person					
Ed Acosta Inc.							
		Company					
	2341 Whitfid	eld Park Avenue					
•	A	ddress					
			,				
	Sarasota	Florida 34243					
	City/State	and Zip Code					
		-					
		sonsauto.net					
	E-mail address: (to be used for	r future annual repo	ort notification)				
For further is	nformation concerning this matter, pleas	se call:					
	Ed Acosta	at (941	758-6488				
	Name of Contact Person	Area Code) 758-6488 & Daytime Telephone Number				
Enclosed is a	a \$35.00 check made payable to the Dep	partment of State.					
	→ Mailing Address:		Address:				
	Amendment Section		ment Section				
	Division of Corporations P.O. Box 6327		n of Corporations				
	Tallahassee, FL 32314		Building xecutive Center Circle				
	i ananassee, I'L 32314		ssee, FL 32301				

TO:

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

statement of ch	ange is submitted for a co	orporation organize	507.1308, or 617.1308, Fic d under the laws of the Sta d agent, or both, in the Stai	ite of
1. The name of	the corporation: Ed Ac	costa Inc.		
	office address: 2341 V			
	, Florida 34243			
3. The mailing	address (if different):	<u> </u>		
4. Date of incom	rporation/qualification:	01/23/2006	Document number:	P06000010468
	nd street address of the cu artment of State: (If resign		nt and registered office on f	file with the
	7121 12th court ea	ast		
	Sarasota, Florida	34243		
6. The name an (if changed):		•	if changed) and /or register	2010 AUG 23 SEC#E IARY MALLAHASSE
	2341 Whitfield Par	rk Avenue		7
		P.O. Box NOT ac	ceptable	TO PR IT
	Sarasota, Florida	34243	· · · · · · · · · · · · · · · · · · ·	
The street addras changed will	ress of its registered offi Il be identical.	ce and the street add	dress of the business offic	
Such change wanthorized by	vas authorized by resolut the board, or the corpora	tion duly adopted by tion has been notifi	y its board of directors or led in writing of the chang	by an officer so ge.
1	am then		EDWIN AC	:057A
-	ute of an other or director of the appointment as reg of to comply with the prov ond I am familiar with an eing filed merely to refle as been notified in writin	gistered agent and a visions of all statute ad accept the obliga ct a change in the r ag of this change.	Printed or typed nam agree to act in this capacit is relative to the proper ar tion of my position as reg egistered office address, I	
Si	gnature of Registered Agent		Date	
If signing on b	ehalf of an entity:			
	Typed or Printed Name			

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