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## **COVER LETTER**

SUBJECT: HERITAGE AUTOMOTIVE CORPORATION (Name of Corporation) DOCUMENT NUMBER: P06000019392 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: P. Michael Villalobos (Name of Contact Person) Heritage Automotive Corporation (Firm/Company) 3621 S. Cleveland Avenue (Address) Fort Myers, FL 33901 (City/State and Zip Code) For further information concerning this matter, please call: P. Michael Villalobos (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address: Street Address:** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, th ange is submitted for a corporation organized under the laws of the State of <u>FLA</u> er to change its registered office or registered agent, or both, in the State of Florida.	is	
1. The name of	the corporation: HERITAGE AUTOMOTIVE CORPORATION		
	office address: 3621 S. Cleveland Avenue, Fort Myers, FL 33901		
3. The mailing a	address (if different): 3621 S. Cleveland Avenue, Fort Myers, FL 33901		
4. Date of incor	poration/qualification: 2/7/06 Document number: P06000019392		
	d street address of the current registered agent and registered office on file with the rtment of State:		
	Brian Edwards		
	2211 Peck Street, #350		
	Fort Myers, FL 33901		•
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office  P. Michael Villalobos	08 FEB 27	DIVISION OF CORPORATIONS
		A	ORP
	3621 S. Cleveland Avenue (P.O. Box NOT acceptable)	ڣ	ìRAI
	Fort Myers, FL 33901	34	SNOL
The street address changed will	ess of its registered office and the street address of the business office of its registere be identical.	ed agent,	
_	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.		
/4/			
I hereby accept	the appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete per and I am familiar with and accept the obligation of my position as registered agent. The filed merely to reflect a change in the registered office address, I hereby confirm to be a position of this change.  The provided in writing of this change.  The provided in the proper and complete per and complete	formance Or, if this 1 that the	
If signing on be	gnature of Registered Agent) (Date)  Phalf of an entity:		
	Typed or Printed Name)		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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