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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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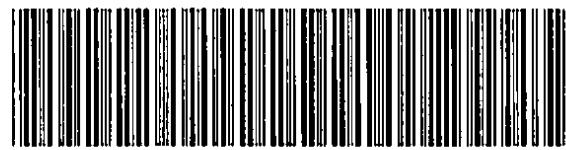
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: COLON TOWING, INC.

Name of Corporation

DOCUMENT NUMBER: P06000044066

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:

Alfredo Sardina

Name of Contact Person

COLON TOWING, INC

Firm/Company

3330 NW 17 ST

Address

MIAMI, FL 33125

City/State and Zip Code

colontowing@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alfredo Sardina

Name of Contact Person

786 328-9624

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

**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: COLON TOWING, INC

2. The principal office address: 3330 NW 17 ST, MIAMI, FL 33125

3. The mailing address (if different): Same as above

4. Date of incorporation/qualification: 03/27/2006 Document number: P06000044066

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) JAN 15 1998

Aylec Gomarin/ Resigned

3332 NW 17 ST, MIAMI, FL 33125

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Ana Sardina

3330 NW 17 ST, MIAMI, FL 33125

P.O. Box NO 1 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

Alfredo Sardina

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.

10/27/2018

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