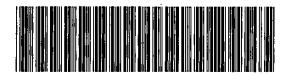
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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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7,	Office Use On	ilv		



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SECRETARY OF STATE



Committee to be Links

COVER LETTER

то:	Amendment Section Division of Corporations			
SUBJE	ECT: N.A.M. Auto Sales, Inc. (Name of Co	orporation)		
DOCU	MENT NUMBER: . P06000050561			
The en	closed Statement of Change of Registered Office	/Agent and fee are submitted for filing.		
Please	return all correspondence concerning this matter	to the following:		
	Kimberly A. Deeb (Name of Con	tact Person)		
N.A.M. Auto Sales, Inc.				
(Firm/Company)				
5121 Grand Palmetto Way				
(Address)				
	North Port, Florida 34286 (City/State an	d Zip Code)		
For fur	ther information concerning this matter, please c	•		
Kimbo	orly A. Deeb			
7,11100	(Name of Contact Person)	at (941) 429-2595 (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

statement of cha	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organiz r to change its registered office or register	red under the laws of the State of Florida	this		
1. The name of t	the corporation: N.A.M. Auto Sales: Inc.				
2. The principal	2. The principal office address: 4023 Sawyer Road Unit #119 Sarasota, Florida 34233				
3. The mailing a	ddress (if different): 5121 Grand Palmette	o Way North Port Florida 34286			
4. Date of incorp	poration/qualification: April 10, 2006	Document number: P06000050561			
	I street address of the current registered age trment of State:	ent and registered office on file with the			
	5121 Grand Palmetto Way				
	North Port Florida 34286				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
		HASS	ETAR		
	4023 Sawyer Road Unit #119	ří,	- C		
	(P.O. Box NOT acceptable)		D PH 12:		
	Sarasota, Florida 34233		, O		
The street address changed will	ess of its registered office and the street a be identical.	ddress of the business office of its regist	ered agent,		
Such change was authorized by the	as authorized by resolution duly adopted to board, or the corporation has been not	by its board of directors or by an officer ified in writing of the change.	· so		
Limberto	Well-	Kimberly A. Deeb , VP			
I hereby accept I further agree of my duties, an document is bei	the appointment as registered agent and to comply with the provisions of all statut ad I am familiar with and accept the oblig ing filed merely to reflect a change in the s been notified in writing of this change.	tes relative to the proper and complete p Pation of mv position as registered agent	t. Or. if this		
Ximbe	Modern	August 5, 2006			
(Si _i	gnature of Registered Agent)	(Date)			
If signing on be	shalf of an entity:				
Kimberly A. D	Deeb , VP				
(7	Typed or Printed Name)				

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