

P06000067542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

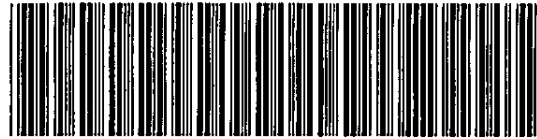
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts NOV 08 2006



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2006

DAVID ARIVETT
DEALERS AUTO AID INC
8895 SW 33RD TERRACE
OCALA, FL 34480

SUBJECT: DEALER'S AUTO AID INC
Ref. Number: P06000067542

We have received your document for DEALER'S AUTO AID INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

An officer or director must sign also.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Document Specialist

Letter Number: 106A00062075

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DEALERS AUTO ADO INC
(Name of Corporation)

DOCUMENT NUMBER: P 060000 7542

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID ARBUETT
(Name of Person)

DEALERS AUTO ADO INC
(Name of Firm/Company)

8895 SW 38th TERRACE
(Address)

OCOLA, FL 34480
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID ARBUETT at (352) 237-9819
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**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: DEALERS AUTO AER INC
2. The principal office address: 8895 SW 38th TERRACE
OCALA, FL 34480
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5-18-06 Document number: P06000067542
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

DONALD WAKE
9169 S US 441
OCALA, FL 34420

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

DAVID ARIVETT
8895 SW 38th TERRACE
(P.O. Box NOT acceptable)
OCALA, FL 34480

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]
(Signature of an officer or director)

DAVID ARIVETT
(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.

[Signature]
(Signature of Registered Agent)

10/19/06
(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

CR2E045 (8/05)

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TALLAHASSEE, FLORIDA