## P06000071344

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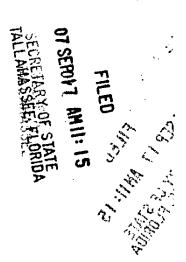
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Alvans scratch & Dout Repairs inc. (Name of Corporation)
DOCUMENT NUMBER: PD600071344
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:
(Name of Contact Person)  (Firm/Company)
1036 Malagast Address)  Orlando F1 32822 (City/State and Zip Code)
For further information concerning this matter, please call:
Alunto Castillo at 407 451 9408 (Name of Contact Person) (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: HVO/05 SCratch & Deut Repairs, 1
2. The principal office address: 9407 E Colonial Dr. Orlando
Fl 32817
3. The mailing address (if different): 1036 Walaga 97.  Oclay do Fl. 32822
4. Date of incorporation/qualification: 5. 122/06 Document number: P06000713 44
5. The name and street address of the current registered agent and registered office on file with the Florida Department of Statis 110 Alvaro
Orlando H1. 32822
6. The name and street address of the new registered agent (if changed) and /or registered office
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
9401 E COTONIAI DI.
Orlando Florida 32817 (P.O. Box NOT 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)  ALUARO CRS/1/10 Pr (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 of Registered Agent)  9/13/07 (Date)
If signing on behalf of an entity:
ALVARO COSTIII O

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