P0600053386

(Re	equestor's Name)	
(Ac	dress)	
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PICK-UP		MAIL
(Bu	usiness Entity Nam	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	



12/15/08--01009--006 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: 7th GEAR SALES, INC. (Name of Corporation)

+

DOCUMENT NUMBER: P06000085386

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:

FRANK SMITH, ESQ. (Name of Contact Person)

INFANTE, ZUMPANO, HUDSON & MILOCH, LLC (Firm/Company)

> 500 S. DIXIE HIGHWAY, SUITE 302 (Address)

CORAL GABLES, FL 33146 (City/State and Zip Code)

For further information concerning this matter, please call:

FRANK SMITHat (786)345-2120(Name of Contact Person)(Area Code & Daytime Telephone Number)

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

<u>Mailing Address:</u> 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: <u>7TH GEAR SALES. INC</u>
- 2. The principal office address: C/O INFANTE, ZUMPANO, HUDSON & MILOCH, LLC

500 S. DIXIE HIGHWAY, SUITE 302, CORAL GABLES, FL 33146

3. The mailing address (if different):

4. Date of incorporation/gualification: 6/22/2006 Document number: P06000085386

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)

PLOUCHA, L.M. ESQ.

C/O ATKINS, DINER, STONE, MANKUTA 7 PLOUCHA P

100 S.E. 3RD AVE STE 1400 FT LAUDERDALE, FL 33394

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

C/O INFANTE, ZUMPANO, HUDSON & MILOCH, LLC

500 S. DIXIE HIGHWAY, STE 302 (P.O. Box NOT acceptable)

CORAL GABLES, FL 33146

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.

GLENIN ROBINSON, PRESIDENT (Printed or typed name and tille)

12/11/08

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signature of an officer or director

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.

gnature of Registered Agent)

If signing on behalf of an entity:

- Romale Single (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)