

PO6000130026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

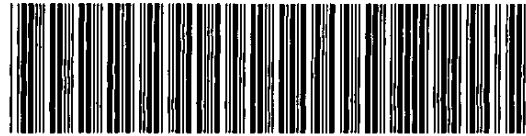
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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2-14-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: INAOLY AUTO TECH

(Name of Corporation)

DOCUMENT NUMBER: P06000130026

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:

ODALIS RODRIGUEZ

(Name of Contact Person)

INAOLY AUTO TECH CORP.

(Firm/Company)

10850 SW 188 ST

(Address)

MIAMI, FLORIDA 33157

(City/State and Zip Code)

For further information concerning this matter, please call:

ODALIS RODRIGUEZ

(Name of Contact Person)

at (305)

975-6554

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2008

ODALIS RODRIGUEZ
18326 SOUTH DIXIE HWY
MIAMI, FL 33157

SUBJECT: INAOLY AUTO TECH. CORP.
Ref. Number: P06000130026

We have received your document for INAOLY AUTO TECH. CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list only one registered agent for your corporation. Please have the new agent sign the acceptance.

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) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 508A00007191

**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: INAOLY AUTO TECH CORP.
2. The principal office address: 10850 SW 188 ST MIAMI, FLORIDA 33157
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/2007 Document number: P06000130026
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

MARIO I. RODRIGUEZ

10850 SW 188 ST MIAMI, FLORIDA 33157

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

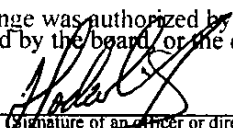
18326 SOUTH DIXIE HWY MIAMI, FLORIDA 33157

(P.O. Box NOT acceptable)

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

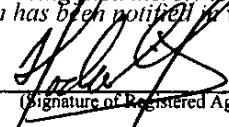
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

MARIO I. RODRIGUEZ/ PRESIDENT

(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)

2/10/08
(Date)

If signing on behalf of an entity:

MARIO I. RODRIGUEZ

(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)