

PO7000013389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

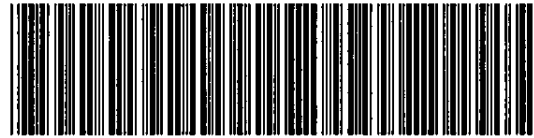
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

R.A. Change

C. Couffette AUG 09 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TOYZ 4 TRUCKZ INC.
(Name of Corporation)

DOCUMENT NUMBER: P07000013389

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:

ALDO R. ESCARPIO
(Name of Contact Person)

TOYZ 4 TRUCKZ INC.
(Firm/Company)

6001 S.W. 8 STREET
(Address)

MIAMI, FL 33144
(City/State and Zip Code)

For further information concerning this matter, please call:

ALDO R. ESCARPIO at (786) 587-6003
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

Aug 01
July 27, 2007

ALDO R. ESCARPIO
TOYZ 4 TRUCKZ INC.
6001 SW 8 STREET
MIAMI, FL 33144

SUBJECT: TOYZ 4 TRUCKZ INC.
Ref. Number: P07000013389

We have received your document for TOYZ 4 TRUCKZ INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 607A00046891

RECEIVED
07 AUG -9 AM 8:00
DIVISION OF CORPORATIONS

RECEIVED
07 AUG -1 AM 8:00
DIVISION OF CORPORATIONS

**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: TOYZ 4 TRUCKZ INC.
2. The principal office address: 6001 S.W. 8 STREET
MIAMI, FL 33144
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/29/2007 Document number: P07000013389
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
ALEJANDRO ROCA
8225 LAKE DRIVE APT#505
MIAMI, FL 33166

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

* PEDRO L. NAVARRO
12955 S.W. 188 STREET
(P.O. Box NOT acceptable)
MIAMI, FL 33177

07 AUG -9 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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.

Aldo L. Escario
(Signature of an officer or director)

Aldo Escario
(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)

Pedro L. Navarro 7/18/07
(Date)

If signing on behalf of an entity:

Pedro L. Navarro
(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