P07000042145

(Requ	estor's Name)	
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PA change News



COVER LETTER

Division of Corporations
SUBJECT: <u>Ultimate Auto Connection</u> , <u>Inc.</u> (Name of Corporation)
DOCUMENT NUMBER: <u>P0700042145</u>
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:
Melanie Lahan
Melanie Labon (Name of Contact Person)
Ultimate Auto Connection
(Firm/Company)
3699 S. Orange Blossom Trail (Address)
Orlando, FL 32839 (City/State and Zip Code)
For further information concerning this matter, please call:
Mclanie Labon at (321) (89-3377 (Name of Contact Person) (Area Code & Daytime Telephone Number)
England in a \$25.00 shoot made mounts to the Donaton of Court

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

TO:

Amendment Section

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: <u>Ultimate Auto Connection</u> , <u>Inc.</u>
2. The principal office address: 3699 S. Orange Blossom Trail
Driando, F. 32839
3. The mailing address (if different): Same as above
-> 3699 S. Orange Blossom Tr. Orlando, 12 32839 6
4. Date of incorporation/qualification: 4/04/07 Document number: P0700042145
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Presidential Services Incorporated
1217 Cape Coral PKWY #300
Cape Coral, FL 33904
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Melanie Labon
3499 S. Drange Blossom TRail (P.O. Box NOT acceptable)
Orlando, FL 32839
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.
Mularia Labor Mcianie Labor/ President
(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.
Melanie (Signature of Registered Agent) 5/01/07 (Date)
If signing on behalf of an entity:
Melanie Labon (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