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SECRETARY OF STATE DIVISION OF CORPORATION

R.A.

FEB 1 4 2013 T. BROWN

COVER LETTER

Division of Corporations
SUBJECT: Trim Limousine, Inc. Name of Corporation
DOCUMENT NUMBER: PO70000 44199
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
Name of Contact Person
Firm/Company
2540 ANDERSON DK
Address
CIEAR LATER, F1 3376/ City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bront Agin at (727) 423 8466 Name of Contact Person Area Code & Daytime Telephone Number
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

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

8

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: Trim Limous INE, Inc.	
2. The principal office address: 1245 N, HERCULES AVE	
Clearnator, F1 33765	
3. The mailing address (if different): 2540 ANDEES ON DOZ	
Clear mater, FI 3376-1	
4. Date of incorporation/qualification: 4-9-2007 Document number: Po 7000 44199	
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)	
Brent Agin M.D.	
4623 AYRON TERRACE - Eu	
PALM (TARBOR, F1 34685 The name and street address of the new registered agent (if shanged) and for registered office.	i
(if changed):	FILED C
Shruft Jones	7.T.C
2540 ANDERSON DN P.O. Box NOT acceptable	•
Clearnater, Fl 33761	
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 of the corporation has been notified in writing of the change.	
Signature of director Brent Agin M.D. Director 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 2/1/3	
If signing on behalf of an entity:	
Tring Lines Inc. Typed or Printed Name	

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