

P070000101669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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RA
Change

05/07/08--01013--009 **35.00

RECEIVED

08 MAY -7 AM 11:03

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

2008 MAY -7 PM 1:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AR
5/7/08

**LAZARUS
CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. AUTO PAINT SOLUTIONS, INC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in
☐ Mail out

☒ Pick up time 2:00
☐ Will wait

☐ Photocopy

☐ Certified Copy
☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☒ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

**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: Auto Paint Solutions, Inc.
2. The principal office address: 16531 SW 61 Lane
Miami, FL 33193
3. The mailing address (if different): 16531 SW 61 Lane
Miami, FL 33193
4. Date of incorporation/qualification: 9/12/07 Document number: P07000101669
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Kleber Tejada
16531 SW 61 Lane
Miami, FL 33193

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

Ailime Tejada
16531 SW 61 LANE
(P.O. Box NOT acceptable)
MIAMI FL 33193

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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.

X
(Signature of an officer or director)

Kleber J. Tejada
(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.

Ailime Tejada
(Signature of Registered Agent)

5/5/08
(Date)

If signing on behalf of an entity:

Ailime Tejada
(Typed or Printed Name)

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