

PO7000134427

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

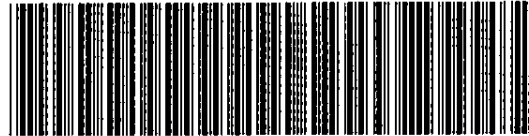
(Business Entity Name)

(Document Number)

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Change
6-9-11
FILED
2011 JUN -7 AM 8:39
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: South Florida Tool Supply (DBA) Dr. Bayona Trailer &
Name of Corporation Chassis Specialist

DOCUMENT NUMBER: P07000134427

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:

Iliana Bayona
Name of Contact Person

South Florida Tool Supply
Firm/Company

8942 NW 177 Terr
~~5561 SW 64 place~~
Address

Mia, FL 33166
~~Mia, FL 33155~~
City/State and Zip Code

bayonai @ bellsouth.Net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Iliana Bayona at (305) 322-0251
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

**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: South Florida Tool Supply - Dr. Bayona Trailer
(DBA)
2. The principal office address: 8942 NW 177 Terr
Miami, FL 33166
3. The mailing address (if different): Same

4. Date of incorporation/qualification: 2007 Document number: P07000134427

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)

Change: Iliana Bayona (will be) 5561 SW 64 place
Miami, FL 33155

NOT: Iliana Bayona 6301 NW 74 Ave Mia, FL 33166

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

Mailing Will Be: 8942 NW 177 Terr
Mia, FL 33166

P.O. Box NOT acceptable

Alfredo Bayona

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.

I Bayona
Signature of an officer or director

Iliana Bayona
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.

I Bayona
Signature of Registered Agent

6/4/2011
Date

If signing on behalf of an entity:

I Bayona
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