

P080000 22308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

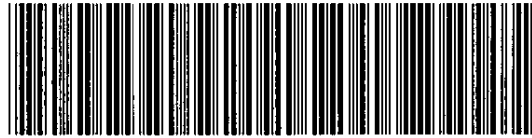
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

6/18/09
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P220

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Big Valley Performance Corp.
Name of Corporation

DOCUMENT NUMBER: P 080000 22308

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:

Wilson Tavaraz (New President)
Name of Contact Person

Firm/Company

365 W Taft Vine land Rd Suite 102
Address

Orlando FL, 32824
City/State and Zip Code

sales@bigvalleyperformance.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Herson Rosa at (407) 455-8271
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: Big Valley Performance Corp.
2. The principal office address: 365 W Taft Vineland RD Suite 102
Orlando FL 32824
3. The mailing address (if different): _____
4. Date of incorporation/qualification: _____ Document number: P08000022308
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)

Victor Caputis
16243 Bristol Lake Cir
Orlando FL 32828

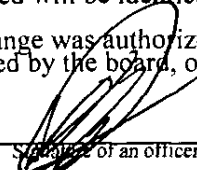
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Wilson Tavaréz
365 W Taft Vineland RD Suite 102
P.O. Box NOT acceptable
Orlando, FL 32824

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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.



Signature of an officer or director

Victor Caputis

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.

W. Tavaréz

Signature of Registered Agent

6/15/09

Date

If signing on behalf of an entity:

Wilson Tavaréz

Typed or Printed Name

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