P08000045365

(Requestor's Name)			
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(Address)	_		
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)	_		
(Basilless Ellin, Halle)			
(Document Number)			
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Achange Thereis 6-23-08

COVER LETTER

TO:	Amendment Section Division of Corporations					
CUPI	ON OIL & TIRES CO					
SUBJECT: OIL & TIRES CO. (Name of Corporation)						
DOCUMENT NUMBER: P08000045365						
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:						
MARFRED SUAZO						
(Name of Contact Person)						
	OIL & TIRE (Firm/Cor					
	(i illii coi	,				
	6440 SW 4	0 ST				
	(Address)					
	MIAMI, FL 3					
(City/State and Zip Code)						
For fur	ther information concerning this matter, please ca	III:				
MARÉ	RED SUAZO	at (305) 662-1699				
	(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	Street Address: Amendment Section Division of Corporations				
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				

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

		7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of FLORIDA			
in orde	er to change its registered office or i	registered agent, or both, in the State of Florida.			
1. The name of	the corporation: OIL & TIRES CO.				
2. The principal	office address: 6440 SW 40 ST, M	IAMI, FL 33155			
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification: 5/5/2008	Document number: P08000045365			
	d street address of the current registertment of State:	ered agent and registered office on file with the			
	ANGEL SUAZO				
	16349 SW 50 TERR				
	MIAMI, FL 33185	記号で			
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered office			
	MARFRED SUAZO				
	6440 SW 40 ST				
	(P.O. Box NOT acc	eptable)			
The street addreas changed will	ess of its registered office and the s be identical.	street address of the business office of its registered agent,			
Such change wa authorized by th	as authorized by resolution duly ac he board, or the corporation has be	lopted by its board of directors or by an officer so en notified in writing of the change.			
T May	FIED Sucaso	MARFRED SUAZO PRESIDENT (Printed or typed name and title)			
I hereby accept I further agree to of my duties, and document is bei corporation has	the appointment as registered age to comply with the provisions of al ad I am familiar with and accept th ing filed merely to reflect a change s been notified in writing of this ch	nt and agree to act in this capacity. It statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the ange.			
+ MA	Afat Sueso gnature of Registered Agent)	6/18/2008			
(Si	gnature of Registered Agent)	(Date)			
If signing on be	chalf of an entity:				
(1	Typed or Printed Name)				

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