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COVER LETTER

SUBJECT: AUTOKONTROL USA,IN Name of Corporation DOCUMENT NUMBER: P080001115	83 fee are submitted for filing.						
DOCUMENT NUMBER: P080001115	fee are submitted for filing.						
The enclosed Statement of Change of Registered Office/Agent and							
Please return all correspondence concerning this matter to the follo							
Trease return an correspondence concerning this matter to the force	2						
F. Steven Herb, Esq Name of Contact Person	·						
Name of Contact Person							
Nalasallassa III D							
NelsonHesse, LLP Firm/Company							
T Hill/Company							
Address							
Sarasota, FI 34237 City/State and Zip Code							
City/State and Zip Code							
sherb@nelsonhesse.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
F. Steven Herb at (9	366-7550 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 Sta	te.						
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 2	treet Address: Immendment Section Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, FL 32301						

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

statement of cha	provisions of sections 607 inge is submitted for a cor ir to change its registere:i	poration organiza	ed under the laws of the	State of Florida	his
1. The name of t	the corporation: Autoko	ontrol USA,	Inc.		· .=
2. The principal	office address: 4370 S.	Tamiami Trail	Suite 321		
	Saraso	ota, FI 34231			
3. The mailing a	ddress (if different):				
4. Date of incorp	ooration/qualification:	12/30/08	Document number:	P08000111	583
	I street address of the currentment of State: (If resigne			on file with the	
	Resigned				·
		· ·			
					2011
6. The name and (if changed):	I street address of the new	registered agent (if changed) and /or regi	stered office	F1LE
	NH Business Service	ces, Inc.		SEE	N TE T
	2070 Ringling Blvd.	PO Box NOT a			
	Sarasota, Fl 34237	IAO BOX NOT #	ссеравіе	RIOF	53
The street addre as changed will	ess of its registered office be identical.	e and the street ac	ldress of the business o	office of its registe	red agent,
Such change wa authorized by th	as authorized by resolution ne board, or the corporati	on duly adopted b on has been notif	by its board of directors fied in writing of the ch	s or by an officer s nange.	0
3	re of an officer or director		Printed or typed	I name and title	
I hereby accept I further agree to of my duties, an document is bein corporation has	the appointment as regis to comply with the provis d I am familiar with and ng filed merely to reflect s been notified in writing	stered agent and sions of all statute accept the oblige a change in the of this change.	agree to act in this cap es relative to the prope ation of my position as registered office addres	acity. r and complete pe registered agent. ss, I hereby confir.	rformance Or, if this m that the
Sign	nature of Registered Agent		8/17/ _{Dat}	2 <i>011</i>	
	half of an entity:				
	usiness Services, Inc yped or Printed Name	·			