P0900022640

(Reque	stor's Name)	
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(City/Si	ate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busine	ess Entity Name)	<u>-</u>
(Docum	nent Number)	
Certified Copies	Certificates of S	tatus
Special Instructions to Filir	ng Officer:	

Office Use Only



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MAR 23 2010



March 8, 2010

OSMAN AKTAS BAY AUTO GROUP INC. 4315 EAST HILLSBOROUGH AVE. TAMPA, FL 33610

SUBJECT: BAY AUTO GROUP INC.

Ref. Number: P09000022640

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 110A00005677

COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: Bay Auto Gosp Inc. Name of Corporation
DOCUMENT NUMBER: <u>P090000 22640</u>
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:
Osman AKTAS Name of Contact Person
Bay Auto Group Inc.
4315 E. Hillsborough Ave. Address
City/State and Zip Code bazautoproup @gmast. com E-mail address: (to be used for future annual report notification)
La a La a a 60 and can
6d Jayro resultant in Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person Name of Contact Person Area 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 State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Bay Auto Group Inc.
2. The principal office address: 4315 E, Hillsborough Ave.
3. The mailing address (if different): 4315 E. Hilkborough Ave. Tampa - Fl 33610
4. Date of incorporation/qualification: 03\11\09 Document number: P0900022640
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)
Osman AKTAS
6711 N. Florido Ave.
Tampo-FL 33604
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Osman AKTAS 4315 E. Hillsborough Ave. Tamps-FL 3361
4315 E. Hillsborough Ave. Tampa-Fl 33610 P.O. Box NOT Icceptable
· · · · · · · · · · · · · · · · · · ·
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 Carofficer or director 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.
(Clar 03/11/10
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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