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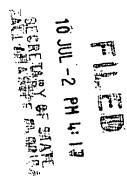
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Special Instructions to	Filing Officer:	
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Office Use Only.



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7-9-10

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CMOORE AUTO SERVICES, INC Name of Corporation DOCUMENT NUMBER: PO 9 000082135
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:
rease return an correspondence concerning this matter to the following.
Choistophen MOORE Name of Contact Person
CMOORE AUTO JERUICOS, INC.
14280 South Military MAIL, #6757
Decory Beach, FLD1104 33484 City/State and Z/p Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chois Mone of Contact Person at (561) 376-4944 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 FLOTILA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CMOORE AUTO SERVICES IN &
2. The principal office address: 14280 South MILITARY MACL, #675
Dalday BRACL , FLOTIDA 33484
3. The mailing address (if different): 5 Are 15 NBOUT
4. Date of incorporation/qualification: 10/05/09 Document number: Po9000082135
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)
Choistopher I- Moore = 3
15115 Michel ANGO BIUS #104 = 1
Delong Beach, From 334 8 3 11
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Christopher I. Moore
55) > 14280 South Military MAIL, # 6757 P.O. Box NOT acceptable Dellay Betel Florisa 33484
Dellay Betel FLORISA 33 484
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.
Mustale flore Chois topken T. Moore Printed or typed name and title
I haraby accent the appointment as registered agent and agree to get in this canacity
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.
1-22-10
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

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