## P090000089544

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: American Metal Scrap Inc.
Name of Corporation

DOCUMENT NUMBER: P09000089544

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:

Mushtaq Mian

Name of Contact Person

American Metal Scrap Inc.

Firm/Company

3228 NW 68 Street

Address

Miami, FL 33147

City/State and Zip Code
mianmushtaq@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mushtaq Mian

,954 7735373

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

statement of c	change is submitted for a corporation	17,0302, 607,1308, or 617,1308, Florido organized under the laws of the State of registered agent, or both, in the State of	Florida
	of the corporation: American Me		
2. The princip	pal office address: 3328 NW 68 \$	Street, Miami, FL 33147	
3. The mailin	g address (if different):		
4. Date of inc	corporation/qualification: 10-28-20	Document number: P090	00089544
	and street address of the current regist partment of State: (If resigned, enter r	tered agent and registered office on file resigned)	with the
1	Maqsood Waseem		
	2601 NW 32 Avenue,		
1	Miami, FL 33142		- 무
6. The name (if changed	5	ed agent (if changed) and /or registered o	TR JUL 17 AM 9: 89
	3228 NW 68 Street,		
	P.O. B Miami, FL 33147	ox NOT acceptable	_ 
The street ad		street address of the business office of	<b></b>
	t .	dopted by its board of directors or by a een notified in writing of the change.	
	m-selem	Nadeem, Muhammad	<del></del>
I hereby acce I further agre performance agent. Or. if	nature of an other of director ept the appointment as registered ag ee to comply with the provisions of a of my duties, and I am familiar with	ill statutes relative to the proper and co and accept the obligation of my position to reflect a change in the registered off	mplete on as registered
	Signature of Registered Agent	Date	
If signing on	behalf of an entity:		
<del></del>	Typed or Printed Name		
	* * * FILIN	NG FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314