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P10000031251

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP		MAIL
(Bus	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	<u> </u>
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SECRETARY OF STATE INVISION OF CORFORATIONS 17 MAY 22 PM 12: L3

Ra Change

MAY 3 0 2017 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Malo Automotive Group, Inc.

Name of Corporation

DOCUMENT NUMBER: P10000031251

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:

A. Edward Quinton, III

Name of Contact Person

Quinton & Paretti, P.A.

Firm/Company

1 SE 3rd Avenue, Suite 1405

Address

Miami, FL 33131

City/State and Zip Code

equinton@quintonparetti.com

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

For further information concerning this matter, please call:

A. Edward Quinton, III

Name of Contact Person

358-2727

Area Code & Daytime Telephone Number

HAY 22 PH 12: 43

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

CR2E045 (03/12)

Pursuant l	BOTH FOR CORPORATIONS 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 Florida a order to change its registered office or registered agent, or both, in the State of Florida.	
1. The nan	ne of the corporation: Malo Automotive Group, Inc.	
2. The prir	acipal office address: 8655 Pines Blvd., Pembroke Pines, FL 33024	
3. 'The mai	ling address (if different):	
4. Date of	incorporation/qualification: 4/9/1010 Document number: P10000031251	
	ne and street address of the current registered agent and registered office on file with the Department of State: (If resigned, enter resigned)	
	Oscar J. Vila, Esq.	
	201 Alhambra Circle, Suite 702	
	Coral Gables, FL 33134	
6. The nam (if chang		HAY 22
	A. Edward Quinton, III, Esq.	РМ
	1 SE 3rd Avenue, Suite 1405 P.O. Box NOT acceptuble	PH12: 43
	Miami, FL 33131	يو. نيد >
The street as changed	address of its registered office and the street address of the business office of its registered age will be identical.	ent,
Such chang authorized	e way anthroutive strain by the corporation duly adopted by its board of directors or by an officer so by the corporation has been notified in writing of the change.	
	SEBASTIAN MATO SEBASTIAN MATO Sebastian Malo Preside Printed or typed name and title	ent
	Agniture of an officer of thector set of the	
hereby con	Signature of Registered Agent	_
If signing o	n behalf of an entity:	
	Typed or Printed Name	
CR2E045 (03	* * * FILING FEE: \$35.00 * * * Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 /12)	

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