

P100000032202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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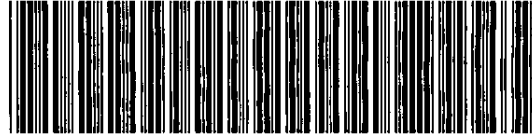
(Business Entity Name)

(Document Number)

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STATE OF ALABAMA  
FALL P-410 2016

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: AMI Group Inc  
Name of Corporation

DOCUMENT NUMBER: P100000032202

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:

Audrey Steavens  
Name of Contact Person

AMI Group, INC  
Firm/Company

705 NE 24 Ave  
Address

Pompano Beach, FL 33062  
City/State and Zip Code

aib007@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Audrey Steavens at ( 305 ) 772-3867  
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**

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AMI Group, Inc
2. The principal office address: 705 NE 24 Avenue  
Pompano Beach, FL 33062
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 4-13-10 Document number: P10000032202
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)

Audrey Bayer Steavens  
1531 SE 12 Street  
Deerfield Beach, FL 33441

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Audrey Bayer Steavens  
705 NE 24 Avenue  
P.O. Box NOT acceptable  
Pompano Beach FL 33062

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STATE OF FLORIDA

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.

Audrey Steavens  
Signature of an officer or director

AUDREY STEAVENS  
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.

Audrey Steavens  
Signature of Registered Agent

5/3/16  
Date

If signing on behalf of an entity:

AUDREY STEAVENS  
Typed or Printed Name

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

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