

P11000036242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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R. White
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R. White

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AUTO MAIA CORP
Name of Corporation

DOCUMENT NUMBER: P11000036242

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:

Carlos Trindade
Name of Contact Person

Auto Maia Corp.
Firm/Company

601 NW 12 Ave
Address

Bonnybrook Beach FL 33069
City/State and Zip Code

ata.trindade@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos Trindade at (754) 235 4066
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: Auto Maia Corp.
2. The principal office address: 601 NW 12 Ave, Pompano Bch, FL 33069
3. The mailing address (if different): 601 NW 12 Ave, Pompano Beach, FL 33069
4. Date of incorporation/qualification: 04/13/2011 Document number: P11000036242
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)

Carlos H Maia da Trindade
1710 NW 22nd CT #1
Pompano Beach, FL 33069

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

Carlos H Maia da Trindade
601 NW 12 Ave
Pompano Beach, FL 33069

P.O. Box NOT acceptable

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]
Signature of an officer or director

Carlos H. Maia da Trindade
Printed or typed name and title
OWNER

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.

[Signature]
Signature of Registered Agent

10/12/2015
Date

If signing on behalf of an entity:

Carlos H. Maia da Trindade
Typed or Printed Name

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