

PI 1000577681

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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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AUG 23 2013

R. WHITE

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AUG 23 AM 11:28



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 2, 2013

ADAM SINGLETON  
FAST OIL & LUBE PUNTA GORDA INC  
PO BOX 511058  
PUNTA GORDA, FL 33951

SUBJECT: FAST OIL & LUBE PUNTA GORDA, INC.  
Ref. Number: P11000077681

We have received your document for FAST OIL & LUBE PUNTA GORDA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An officer or director must sign authorizing the change of registered agent/address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 813A00018661



850-245-6897

Attn: Carolyn

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 2, 2013

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Rebekah White  
Regulatory Specialist II

Letter Number: 813A00018661

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Fast Oil & Lube Punta Gorda, Inc.  
Name of Corporation

DOCUMENT NUMBER: P11000077681

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:

Adam Singleton  
Name of Contact Person

Fast Oil & Lube Punta Gorda, Inc.  
Firm/Company

P.O. Box 511058  
Address

Punta Gorda, FL 33951  
City/State and Zip Code

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

For further information concerning this matter, please call:

Adam Singleton at ( 941 ) 295-7877  
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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Fast Oil & Lube Punta Gorda, Inc.
2. The principal office address: 2725 Tamiami Trail  
Punta Gorda, FL 33950
3. The mailing address (if different): PO Box 511058  
Punta Gorda, FL 33951
4. Date of incorporation/qualification: 9/1/2011 Document number: P11000077681
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)

Adam Singleton

95 Vivante Blvd #9524

Punta Gorda, FL 33950

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

Adam Singleton

2725 Tamiami Trail

P.O. Box NOT acceptable

Punta Gorda, FL 33950

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.

Same

Adam Singleton

Signature of an officer or director

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.

Adam B. Singleton  
Signature of Registered Agent

7/26/2013  
Date

If signing on behalf of an entity:

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

CR2E045 (03/12)