

P11000082167

(Requestor's Name)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

JAN 04 2013
T. ROBERTS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: _____

The Auto Brothers Inc.
Name of Corporation

DOCUMENT NUMBER: _____

P11000082167

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:

Heron Dos Reis Sandano
Name of Contact Person

The Auto Brothers Inc.
Firm/Company

511 N. University Dr.
Address

Plantation, Fl. 33324
City/State and Zip Code

TheAutoBrothers@Line.Com

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

For further information concerning this matter, please call:

Heron Sandano

Name of Contact Person

at (954) 865-9167

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

1. The name of the corporation: The Auto Brothers, Inc
2. The principal office address: 541 N. University Dr.
Plantation, FL 33324
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 9/19/11 Document number: P11000082167
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)

Gini Vega-Lawini
541 N. University Dr.
Plantation, FL 33324

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

Herlon B Dos Reis Sandano
541 N. University Dr.
Plantation, FL 33324
P.O. Box NOT acceptable

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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

Herlon B Dos Reis Sandano
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.

[Signature]
Signature of Registered Agent

12/26/12
Date

If signing on behalf of an entity:

Typed or Printed Name

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