# P/2000003222

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TALLAMASSEE, FLORIDA
15 IAN 13 AM 10: 57

JAN 15 2015 T. CARTER

#### **COVER LETTER**

TO: Amendment Section

Division of Corporations

## SUBJECT: FL PRICE BUSTER AUTO SALES INC

Name of Corporation

DOCUMENT NUMBER. P120000

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:

#### **ANTHONY MILLS**

Name of Contact Person

Firm/Company

### 1756 S SUNCOAST BLVD

Address

### HOMOSASSA FL 34448

City/State and Zip Code

## buyherepayhere1756@gmail.com

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

For further information concerning this matter, please call:

ANTHONY MILLS

,,352 \,\794-3836

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Status ange is submitted for a corporation organized under the laws of the State of FLOF er to change its registered office or registered agent, or both, in the State of Floric	RIDA	<u></u>	
1. The name of	the corporation: FL PRICE BUSTER AUTO SALES INC			
2. The principal office address: 1756 S SUNCOAST BLVD, HOMOSASSA FL 34448				
<del>- 1</del>				
3. The mailing a	address (if different):			
4. Date of incorporation/qualification: 01/10/2012 Document number: P12000003222				
5. The name and	d street address of the current registered agent and registered office on file with th rtment of State: (If resigned, enter resigned)			
	LORI A SOWERS			
	312 S BROAD ST			
	BROOKSVILLE FL 34601		7.	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	ANTHONY MILLS		RY O	
	1756 S SUNCOAST BLVD	AH 10:	FST	
	P.O. Box NOT acceptable HOMOSASSA FL 34448	57	ATE RIDA	
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 w authorized by t	as authorized by resolution duly adopted by its board of directors or by an office he board, or the corporation has been notified in writing of the change.	er so		
Signature days officer or director  ANTHONY MILLS, PRESIDENT  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.				
	anature Registered Agent Date	<del></del>		
If signing on be	chalf of an entity:			
1	yped or Printed Name			

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