

P12000025541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

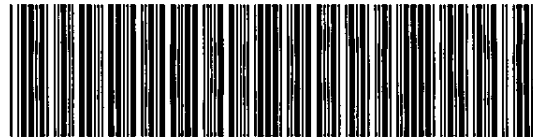
(Business Entity Name)

(Document Number)

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C. CARROTHES

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Auto Theft Task Force, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P12000025541

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 Liuzzi

Name of Contact Person

Auto Theft Task Force, Inc

Firm/Company

PO Box 816575

Address

Hollywood, FL 33021

City/State and Zip Code

pi4684@aol.com

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

For further information concerning this matter, please call:

Anthony Liuzzi

Name of Contact Person

at ( 954 ) 445 6389

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

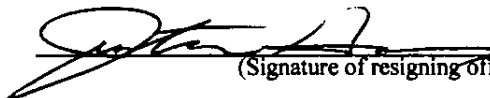
**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JUSTEN HOVEY, hereby resign as VP  
(Title)

of AUTO THEFT TASK FORCE, INC  
(Name of Corporation)

P12000025541, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314