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## COVER LETTER

TO:

Amendment Section **Division of Corporations** 

EURO CAR WHISPERER INC

Name of Corporation

P12000038122

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:

RYAN GIDDINGS

Name of Contact Person

EURO CAR WHISPERER INC

Firm/Company

845 NE POP TILTON PL #13

Address

JENSEN BEACH, FL 34957

City/State and Zip Code

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

For further information concerning this matter, please call:

RYAN GIDDINGS

Name of Contact Person

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	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this a organized under the laws of the State of FL registered agent, or both, in the State of Florida.	
	the corporation: EURO CAR \		
2. The principal	office address: 845 NE POP BEACH, FL 34957	TILTON PL UNIT 13	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 04/23/20	D12Document number: P12000038122	
5. The name and		stered agent and registered office on file with the	
	RYAN GIDDINGS		
	699 SW ABODE AVE		
	PORT SAINT LUCIE, FI	_ 34953	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		ed agent (if changed) and /or registered office	350
	RYAN GIDDINGS	L UNIT 13	器型
	845 NE POP TILTON P	L UNIT 13	器
		Sox NOT acceptable # 1957	0.5
	JENSEN BEACH, FL 34	1957	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registered agent,	इ <i>ने</i>
Such change was authorized by the	as authorized by resolution duly a ne board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
		RYAN GIDDINGS, PRESIDENT	
I hereby accept I further agree performance of agent. Or, if th	to comply with the provisions of a my duties, and I am familiar with	Printed or typed name and title  tent and agree to act in this capacity.  tent and agree to act in this capacity.  tent and agree to act in this capacity.  It statutes relative to the proper and complete  and accept the obligation of my position as registered  to reflect a change in the registered office address, I  tified in writing of this change.	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Т	yped 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