P1300001724

(Re	questor's Name)	
(Ad	dress)	
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





700310337597

03/13/18--01025--014 **25.00

03/26/18--01024--008 **10.00

DIB MAR 23 TH R: 53

RDCh8

MAR 2 6 2010 I

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Top Notch Auto Transport Inc. Name of Corporation		
DOCUMENT NUMBER: P13 000001724		
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:		
Gilbert Correa Name of Contact Person		
Top Notch Auto Transport Inc.		
756 Huntington St NE		
Palm Bay FL 32907 gity/State and Zip Code		
Tophotchautotransport Caol. com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Natalie Correa/Gilbert Correa 386, 383-0003 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 Amendment Section		

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 14, 2018

GILBERT CORREA TOP NOTCH AUTO TRANSPORT INC. 756 HUNTINGTON ST NE PALM BAY, FL 32907

SUBJECT: TOP NOTCH AUTO TRANSPORT INC.

Ref. Number: P13000001724

We have received your document for TOP NOTCH AUTO TRANSPORT INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Florida Profit Corporation. Please complete and return the enclosed blank form(s).

The fee to file your document is \$35.

There is a balance due of \$10.00.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 618A00005194

RECEIVED

18 MAR 23 PM 2: 03

SECRETARY OF STATE
TALLAHASSEE, FLORED:

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: Top Not ch Auto Transport Inc.
2. The principal office address: 756 Huntington St NE Palm Bay FL 32907
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 1-213 Document number: P1300000172
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)
Gilbert Correa
2578 Enterpise Rd MI Pin Enterpise
Orange City FL 32763
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Gilbert Correa
756 Huntington St NE PO Box NOT acceptable
Palm Bay Ft 32907
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.
The Signature of an other or Effector Signature of an other or Effector 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.
+ Sellet Cour 3-20-18
If signing on behalf of an entity:
n signing on octian of an entity.
Typed or Printed Name

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