

P1300050707

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*R. White*

FEB 01 2016

R. WHITE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** R & S Auto Repair Inc  
Name of Corporation

**DOCUMENT NUMBER:** P13000050707

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:

Scott A Koenig

Name of Contact Person

R & S Auto Repair Inc

Firm/Company

1935 Faulk Dr

Address

Tallahassee, FL 32303

City/State and Zip Code

lloydthayer@hotmail.com

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

For further information concerning this matter, please call:

Lloyd M Thayer

Name of Contact Person

at ( 302 ) 652-7620

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

1. The name of the corporation: R & S Auto Repair Inc  
2. The principal office address: 2104 Gilliam LN, Suite 1, Tallahassee FL 32308

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: June 11, 2013 Document number: P13000050707

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)

Lloyd M Thayer  
3009 Eastgate CT.  
Tallahassee, FL 32308

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

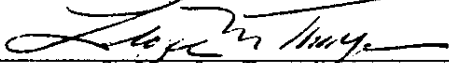
Scott A Koenig  
1935 Faulk Dr  
Tallahassee, FL 32303

P.O. Box NOT acceptable

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TALLAHASSEE FLORIDA

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 of an officer or director

Lloyd M Thayer, Treasurer  
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 of Registered Agent

1-26-2016  
Date

If signing on behalf of an entity:

Scott A Koenig  
Typed 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  
CR2E045 (03/12)