## P14000059153

(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:  Harane  Haran

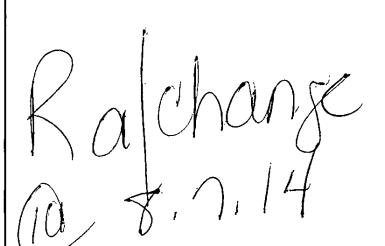
(Requestor's Name)





400262453384

07/21/14--01030--002 \*\*35.00



## COVER LETTER

TO: Amendment Section Division of Corporations 1st Choice Auto Financing Inc Name of Corporation P14000059153 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: Haydee Cruz Name of Contact Person 1st Choice Auto Financing Inc Firm/Company 302 avenue O SW Address Winter Haven FI 33880 City/State and Zip Code stevenace2005@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Haydee Cruz Enclosed is a \$35.00 check made payable to the Department of State. **Street Address: Mailing Address:** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



August 4, 2014

HAYDEE CRUZ 1ST CHOICE AUTO FINANCING INC 302 AVENUE O SW WINTER HAVEN, FL 33880

SUBJECT: 1ST CHOICE AUTO FINANCING INC.

Ref. Number: P14000059153

We have received your document for 1ST CHOICE AUTO FINANCING INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to list the new registered agent and location in part 6 of the form.

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: 914A00016627

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	gistered agent, or both, in the State of Florida.
1. The name of the corporation: 1st Choice Auto	Financing Inc
2. The principal office address: 302 Avenue O S Winter Haven FI 33880	SW
3. The mailing address (if different):	
4. Date of incorporation/qualification: 07/11/2014	Document number: P14000059153
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)	
Ricky Marrero	
302 Avenue O SW Winter	Haven FI 33880
RESIGNED,	
WinterHR	NOT acceptable  NOT Acceptable
The street address of its registered office and the stras changed will be identical.	eet address of the business office of its registered agent,
Such change was authorized by resolution duly adopauthorized by the board, or the corporation has been	oted by its board of directors or by an officer so notified in writing of the change.
	HAYDEE CRUZ PRESIDENT Printed or typed name and title
I hereby accept the appointment as registered agent I further agree to comply with the provisions of all sperformance of my duties, and I am familiar with an agent. Or, if this document is being filed merely to hereby confirm that the corporation has been notified	and agree to act in this capacity.  Itatutes relative to the proper and complete ad accept the obligation of my position as registered
Haydee Crup	07/17/14
If signing on behalf of an entity:	Date
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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