

P14 DDD0073113

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(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CYBER AUTO SALES INC.  
Name of Corporation

**DOCUMENT NUMBER:** P14000073113

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:

FARAH ALI ALMAHDI

Name of Contact Person

CYBER AUTO SALES INC.

Firm/Company

5200 DRISCOLL COURT

Address

ORLANDO FL. 32812

City/State and Zip Code

STV-GEER@YAHOO.COM

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

For further information concerning this matter, please call:

STEVE GEER

Name of Contact Person

at 407 731-6320

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: CYBER AUTO SALES INC.
2. The principal office address: 5151 SOUTH ORANGE BLOSSOM "A" TRAIL ORLANDO FL 32839
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/10/2014 Document number: P14000073113
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)

FARAH ALI ALMAHDI

5200 DRISCOLL COURT

ORLANDO FL 32812

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

43420 US HIGHWAY 27

DAVENPORT FLORIDA 33837

P.O. Box NOT acceptable

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.

*Farah ali Almahadi*

Signature of an officer or director

FARAH ALI ALMAHDI

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.*

*Farah ali Almahadi*

Signature of Registered Agent

10/11/2014

Date

If signing on behalf of an entity:

\_\_\_\_\_  
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)

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