

P140000073171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

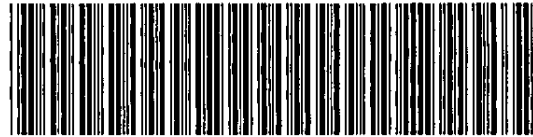
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400294882994

03/20/17--01021--023 **35.00

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
17 MAR 20 AM 9:51

MAR 24 2017
C McNAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Secure Auto Shipping Inc.
Name of Corporation

DOCUMENT NUMBER: PI4000073171

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:

Jose Iglesias

Name of Contact Person

Secure Auto Shipping Inc.

Firm/Company

160 W Camino Real #222

Address

Boca Raton FL, 33432

City/State and Zip Code

Samantha.allen@secureautoshipping.com

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

For further information concerning this matter, please call:

Jose Iglesias

Name of Contact Person

at (954) 336 3524

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 MAR 20 AM 9:51

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: Secure Auto Shipping Inc
2. The principal office address: 160 W Camino Real #222
Boca Raton, FL 33432
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 9-3-14 Document number: P14000073171

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)

Jose A Iglesias
11905 NW 35th St Unit 1
Coral Springs, FL 33065

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

160 W Camino Real #222
P.O. Box NOT acceptable
Boca Raton, FL 33432

FILED
STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
17 MAR 20 AM 9:51

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]
Signature of authorized officer

Jose Iglesias
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]
Signature of registered agent

3/17/17
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)