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(Requestor's Name) (Address) (Address)	400286933784		
(City/State/Zip/Phone #)	07/25/16−−01014−−009 **35.00		
Certified Copies Certificates of Status	<b>2816 JUL 25 PH 4: 00</b> SECRETIVARY OF STATE FALL ALASSEE FLORIDE		
Office Use Only	AUG 0 4 2016 C. CARROTHERS		

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

.

SUBJECT: Blue Diamond Auto Defuiling and Corwash Corporation Name of Corporation DOCUMENT NUMBER: P14 \$\$\$\$\$298 \$\$

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:

Name of Contact Person
Name of Contact Person
Blue Diamond Auto Detailing and Consult Corp. Firm/Company
9953 Sw 154 JH Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

<u>Name of Contact Person</u> at (<u>786</u>) <u>499 - 99 41</u> 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

CR2E045 (03/12)

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

1. The name of the corporation: Blue Diamond Auto Detailing and Corwash Cor 2. The principal office address: 9953 Sw 154 St Mimi FL 33157.	g
2. The principal office address: 9953 SW 154 St Mimi FL 33157.	-
	-
3. The mailing address (if different):	-
	-
4. Date of incorporation/qualification: $\frac{10/8}{2014}$ Document number: $\underline{P14} \phi \phi \phi F298 \phi$	-
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)	
Carlos Ruhido	
<u>Carlos Kulido</u> <u>9550 NW 12th 84. Bay 14A</u>	
Poral 3317 2	
6. The name and street address of the new registered agent (if changed) and /or registered office	
Sheila Svanez_	
9953 SW 154 St	
P.O. Box NOT acceptable Miami FL 33157	
VIII - JJI T	

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

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.

(/··	7/12/2016	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Sheila Suarez		

Typed or Printed Nange

## \* \* \* 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)