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(Re	equestor's Name)				
(Ad	ldress)				
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C. CARROTHERS

JAN 2 1 2016

COVER LETTER

TO:	Amendment Section Division of Corporations
	CARWRAPUS.COM INC.
SUB	Name of Corporation
	P15000005461
DOC	UMENT NUMBER:
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
	PETR JASANSKY
	Name of Contact Person
	CARWRAPUS.COM INC.
	Firm/Company
	310 SE 5TH TERRACE
	Address
	POMPANO BEACH, FL 33060
	City/State and Zip Code
	sebkova@me.com
	E-mail address: (to be used for future annual report notification)
For f	orther information concerning this matter, please call:
PET	R JASANSKY 954 673-9750
	Name of Contact Person at (
Enclo	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle
	rananassee, rl. 32314 2001 Executive Center Circle

Tallahassee, FL 32301

TO:

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

statement of cha	mge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of	Flor	ida				
in orde		egistered agent, or both, in the State of	Florid	da.				
 The name of t The principal 	1131 W MCNAP	COM INC. B RD. POMPANO BEACH, FL 33	069					
2. The principal	office address:			*	·			
3. The mailing a	address (if different):	TERRACE POMPANO BEACH,	, FL	33060				
4. Date of incorporation/qualification: Document number: P1500					0005461			
	rtment of State: (If resigned, enter re	• /	ith th	e				
	UNITED STATES CORPORA	ATION AGENTS, INC.						
	13302 WINDING OAK COU	RTA *		IAL SE	2016			
	TAMPA, FL 33612		-	CRETA L AHAS	2016 JAN 29	F		
6. The name and (if changed):	d street address of the new registered	i agent (if changed) and /or registered of	ffice	CRETARY OF STATE LAHASSEE, FLORID	2			
	PETR JASANSKY			981 981	6: 34			
	310 SE 5TH TERRACE			<i>></i>	æ			
	POMPANO BEACH, FL 3300	k NOT acceptable						
The street addre	ess of its registered office and the st be identical.	treet address of the business office of it	ts reg	istered a	agent,			
	as authorized by resolution duly add ne board, or the corporation has bee					-		
		PETR J	FS7	9NS	KY	PRES		
ŭ	re of an officer or director/	Printed or typed name and tit	le					
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	the appointment as registered ager to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notif	nt and agree to act in this capacity. statutes relative to the proper and con and accept the obligation of my position o reflect a change in the registered offic fied in writing of this change.	nplete n as r ce add	e egistere dress, I	ed .			
	titus	// 15/20 Date	6					
Sign	nature of Registered Agent	/ Pate						
If signing on be	half of an entity:							
Ty	yped or Printed Name							

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