P1600065365 1 (Requestor's Name) (Address) 700314045627 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL 06/05/16 -61001 000 **35.00 (Business Entity Name) (Document Number) 82 : 11 HA 4- NUL 6102 Certificates of Status ____ Certified Copies Special Instructions to Filing Officer:

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COVER LETTER

SECRETARY OF STATUS JIVISION OF CORPURATION

TO: Amendment Section Division of Corporations

Automotive Training and Consulting USA Corp.

Name of Corporation

DOCUMENT NUMBER: P16000065308

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:

Roberto Ramirez

Name of Contact Person

Automotive Training and Consulting USA Corp

Firm/Company

2686 NW 97th Avenue

Address

Miami, FL, 33172

City/State and Zip Code

purchase@autotrain.com

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

at (

For further information concerning this matter, please call:

Roberto Ramirez

Name of Contact Person

786 ,953-6505

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: Automotive Training and Consulting USA Corp

2. The principal office address: 2686 NW 97th Avenue, Miami, FL, 33172

^{*} 3. The mailing address (if different):___

- 4. Date of incorporation/qualification: 08/05/2016 Document number: P16000065308
- 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)

MARTORELL'S OFFICE GROUP CORP

11046 W FLAGLER ST

MIAMI, FL 33174

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

Roberto Ramirez

2686 NW 97th Avenue

P.O. Box: NOT acceptable

Miami, FL, 33172

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 of the corporation has been notified in writing of the change.

Signature of an officer or directo

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 of Registered Agent

05/29/2013

THIN JUN -4 MMII: 2

If signing on behalf of an entity:

Typed or Printed Name

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