P18000057335

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



500316052775

07/26/18--01020--024 **35.00

18 JUL 25 PM 2: 25

Racrang

COVER LETTER

Division of Corporations
SUBJECT: D TEST AUTO //C Name of Corporation
DOCUMENT NUMBER: PL 8000057335
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:
DMITRII KARPOV
D TEST AUTO INC
3929 PENBROKE RD
Hollywood Pt 3302
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (786) 602 - House 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 _ELORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
minutes to change its regimered office on regimered agent, or total, or the total of violation
1. The name of the corporation:
2. The principal office address: 3429 PENBOLE RA
HOUGWOOD FL 33021
3. The mailing address (if different):
1/2/10 01/2000
4. Date of incorporation/qualification: Object 10 Document number: P180005+3
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)
2000 0-0100 11-00
3929 PENDIEREED
HOLY WOOD FL 33021
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
SERGOEL TOMINE
3929 PEMBROKE KD 3 BE
Hall 4 2007 FV 22001
_ nouy wood + Cosood
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.
DMITRI LARDAY
Signature of ap-folloger or director Printed or typed name and title
Thereby 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. Of, 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.
2) I all a comportation has been notified in writing by this change.
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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