

P941000003479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

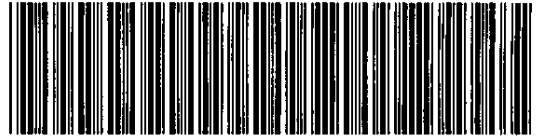
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ODY AUTO SALES, INC
Name of Corporation

DOCUMENT NUMBER: P94000003479

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:

MIGUEL SANCHEZ

Name of Contact Person

ODY AUTO SALES, INC

Firm/Company

100 E 9 STREET

Address

HIALEAH FL 33010

City/State and Zip Code

ODYAUTO2001@AOL.COM

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

For further information concerning this matter, please call:

MIGUEL SANCHEZ

Name of Contact Person

at 305 884-5000

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

**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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ODY AUTO SALES, INC
2. The principal office address: 100 E 9 STREET
HIALEAH, FL 33010
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/18/1996 Document number: P94000003479
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)

RAMON ISMAIL (RESIGNED)

100 E 9 STREET

HIALEAH, FL 33010

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

MIGUEL SANCHEZ

100 E 9 STREET

P.O. Box NOT acceptable

HIALEAH, FL 33010

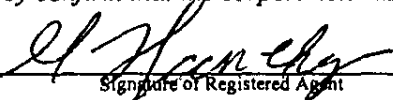
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

MIGUEL SANCHEZ / PRESIDENT
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 of Registered Agent

MARCH 20, 2014
Date

If signing on behalf of an entity:

Miguel Jesus Sanchez
Typed or Printed Name

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