P95000063067

(Requestor's Name)						
(Address)						
\						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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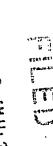


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2600 HOV -3 AM II: 33



COVER LETTER

TO:	Amendment Section Division of Corporations							
SUBJ	ECT: NIX AUTOS INC. (Name of C	orporation)						
DOC	MENT NUMBER: <u>P95000063067</u>							
The er	closed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing.						
Please	return all correspondence concerning this matter	r to the following:						
	RIC Olame of Co	KI NIX						
	(Name of Contact Person)							
NIX AUTOS INC. (Firm/Company)								
205 E EASY (Address)								
FORT PIERCE, FL 34982 (City/State and Zip Code)								
For fur	ther information concerning this matter, please of	all:						
	RICKI NIX (Name of Contact Person)	at (772) 940-4252 (Area Code & Daytime Telephone Number)						
Enclos	ed is a \$35.00 check made payable to the Depart	ment 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

statement of cha	ange is submitted for a corpord	02, 617.0502, 607.1508, or 617 ation organized under the laws be or registered agent, or both,	of the State of _		-
1. The name of	the corporation: NIX AUTO	S INC.			
2. The principal	office address: 601-B S US	S HWY 1 FORT PIERCE	E, FL 34950	 .	
3. The mailing a	address (if different): 205 EA	ST EASY STREET FOR	RT PIERCE, I	FL 34982	
4. Date of incor	poration/qualification: 08/15	/1995 Document nu	mber: <u>P95000</u>	063067	
	d street address of the current r rtment of State: (If resigned, er	egistered agent and registered of the resigned)	office on file wit	h the	
	NIX, RICKI				
	879 NE DIXIE HWY BA	\Y#7		-	
	JENSEN BCH , FL 349	57		· 寸 、 語	
6. The name and (if changed):	d street address of the new regi	stered agent (if changed) and /	or registered offic	ADI BE	Christian Carcana Financial
**** ***,	NIX, RICKI			Sign	m
2 × 1	205 EAST EASY STRE	ET FORT PIERCE, FL : OT acceptable)	34982	AM II: 33 OF SUME E, FLORIDA	O
The street addre	ess of its registered office and be identical.	the street address of the busin	ness office of its	registered agen	ıt,
		ily adopted by its board of dir as been notified in writing of			
	re of an officer or director)	MICHAE (Printex	L NIX V-PRE	ESIDENT	_
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered to comply with the provisions all am familiar with and acco ing filed merely to reflect a ch been notified in writing of th	d agent and agree to act in the of all statutes relative to the ept the obligation of my positi ange in the registered office o is change.	is capacity. proper and com on as registered address, I hereb	plete performan l agent. Or, if th y confirm that th	ice his he
(Ky	enature of Registered Algent)		10/29/2008 (Date)		-
	half of an entity: RICKI NIX Typed or Printed Name)		· · · · ·		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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