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| (Re | equestor's Name) | |
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| (Ad | ldress) | |
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| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE
TALLAPASCEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Rolling Shield Parts, Inc.

P9500091259

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:

Michael P. Peterson

Name of Contact Person

Peterson, Baldor & Maranges, PLLC

Firm/Company

8000 SW 117 Avenue, Suite 206

Address

Miami, Florida 33183

City/State and Zip Code

michael@pbmlegal.net

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

For further information concerning this matter, please call:

Michael P. Peterson

,,305 \270-37*1*

Name of Contact Person

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 State statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida in order to change its registered of the state of Florida in order to change its registered of the state of Florida in order to change its registered of the state of the state of Florida in order to change its registered of the state of the st | da | |
|--|--------------|--------------|
| 1. The name of the corporation: Rolling Shield Parts, Inc. 2. The principal office address: 9875 NW 79th Avenue Hialeah Gardens, FL 33016 | | |
| 3. The mailing address (if different): | | |
| 4. Date of incorporation/qualification: 11/30/1995 Document number: P950000 | 91259 | |
| 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) | | 7\1 IS |
| Peterson, Michael P. Esq. | | ECR! |
| 10631 SW 88 Street, Suite 220 | | UASS LARY |
| Miami, FL 33176 | PH | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | သ သ | E ORIDA |
| Peterson, Baldor & Maranges, PLLC | | |
| 8000 SW 117 Avenue, Suite 206 | | |
| P.O. Box NOT acceptable | | |
| Miami, Florida 33183 | | |
| The street address of its registered office and the street address of the business office of its regas changed will be identical. | gistered age | nt, |
| Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change. | er so | , |
| Signature of an officer or-diffector Printed of typed name and title | A10 | - |
| 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 complet performance of my duties, and I am familiar with and accept the obligation of my position as agent. Or if this document is being filed merely to reflect a change in the registered office achieveby confirm that the corporation has been notified in writing of this change. | regisierea | |
| Signature of Registered Agent Date | | _ |
| If signing on behalf of an entity: Wellson, Os Typed or Printed Nation | | |
| MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 3231 | 4 | |

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