

P97000020500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

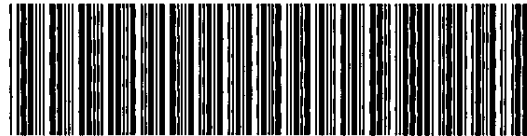
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000262292940

10/14/14--01012--019 \*\*35.00

FILED  
14 OCT 14 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CRM  
10-22-14

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fuel Injection Products & Services, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P97000020500

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:

**Bruce Buchanan**

Name of Contact Person

**Fuel Injection Products & Services, Inc.**

Firm/Company

**2225 J & C Blvd**

Address

**Naples, FL 34109**

City/State and Zip Code

**com112bb@comcast.net**

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

FILED  
14 OCT 14 PM 1:45  
STATE OF FLORIDA  
TALLAHASSEE

For further information concerning this matter, please call:

**bruce buchanan**

Name of Contact Person

at **(239) 592 0511**

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

1. The name of the corporation: fuel injection products  
2. The principal office address: 2225 j & c blvd naples 34109

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 2/28/97 Document number: P97000020500

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)

bruce buchanan

160 10th st north

naples 34104

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

bruce buchanan

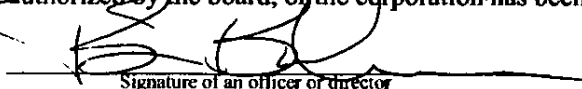
2225 j & c blvd

P.O. Box NOT acceptable

naples, fl 34109

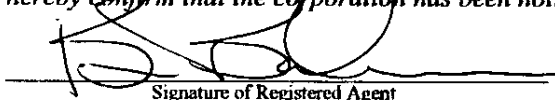
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Bruce Buchanan V.P.  
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

10/9/14  
Date

If signing on behalf of an entity:

  
Typed or Printed Name

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

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

FILED  
14 OCT 14 PM 1:55  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE