FILED Apr 14, 2003 8:00 am

2003 FOR PROFIT CORPORATION

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DOCUMENT # 1. Entity Name ZERO AUTOMOTIVE, IN			Secretary of State 04-14-2003 90352 049 ***150.00							
Principal Place of Business 7410 GROVER LANE LAND O LAKES FL 34639		Mailing Address 7410 GROVER LANE LAND O LAKES FL 34639								
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State		City & State			4. FE	1 Number 59-3426925		Applied For Not Applicable		
Zip Cour	Country Zip Cour		Country		_5. Certificate of Status Desired \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent			_ _	7. Name and Address of New Registered Agent						
			Name							
MOORE, FRED S SR. 7410 GROVER LANE			Street A	Street Address (P.O. Box Number is Not Acceptable)						
LAND O LAKES FL 34639					_					
			City		FL Zip Code					
8. The above named entity submit		purpose of changing its r	egistered office or	registere	d ager	t, or both, in the State of Florida. 1	am famil	iar with, a	ind accept	
the obligations of registered ag										
SIGNATURE										
Signature, typed or printed i	name of registered agent and title	e if applicable. (NOTE:	Registered Agent signatu	re required v	when reins	tating) DA	ATE			
FILE NOW!!! FEE After May 1, 2003 Fee Make Check Payable to Florid	will be \$550.00	te				Election Campaign Financing Trust Fund Contribution,			May Be to Fees	
10. ·	OFFICERS AND DIRE	CTORS	11.		ADD	TIONS/CHANGES TO OFFICERS	AND DIR	ECTORS	IN 11	
PD NAME MOORE, FRED A	QD .	☐ Delete	TITLE					Change	Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the requirer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachm address with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE/

STREET ADDRESS

CITY-ST-ZIP

Daytime Phone #