P97000039755

(Re	questor's Name)	
(Ada	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e#)
PICK-UP		MAIL
(Bu:	siness Entity Nan	ne)
(Doo	cument Number)	· · · · · · · · · · · · · · · · · · ·
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Special Instructions to F	Filing Officer:	
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12/12/02-01113-002 **35.00



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TRANSMITTAL LETTER

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TO: Amendment Section Division of Corporations

NUMBER: P9700039755 SUBJECT DOCUMENT NUMBER 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:

r reuse retuin un correspondence concerning uns matter to the renowing.
Shannon I. Bigham
(Name of person)
The Auto Team
(Name of firm/company)
P.O. BOX 4249
(Address)
Winter Park, FZ. 32793 (City/state and zip code)

For further information concerning this matter, please call:

hannon J. Bigham (Name of person) at (407, 672-0330 (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 Divísion of Corporations 409 E. Gaines Street Tallahassee, FL 32399

CR2E045(07/02)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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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 $\frac{1}{1000}$ and $\frac{1}{1000}$ in order to change its registered office or registered agent, or both, in the State
of Florida. Do tu Reasie IN, TUC
1. The name of the corporation: <u>Data Review function</u> 2. The principal office address: <u>P.O. BOX 1840</u> , <u>Goldenrod</u> , <u>FL</u> .
32733-1840
3. The mailing address (if different): <u>P.O. BOX 1840, GDICICNTOD, FL.</u> <u>32733-1840</u>
4. Date of incorporation/qualification: 05/05/1997 Document number: <u>P97000397</u> 55
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Boc Corporate Services Central FL FIEC,
390 N. Orange Ave, Ste 1100
Orlando, FL. 32801
6. The name and street address of the new registered agent (if changed) and /or registered office (C) changed): Mark Somorsfell, ESGULTEEE =
200 E. Broward Blvd., 18th Floor
FF. LAUDEFDALE, FL. 33301
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 anthorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the conformation has been notified in writing of the change. (Signature of an officer, chamman or vice chairman of the board)
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 dures, and I am familiar with and accept the obligation of my position as registered agent. D, if this document is being filed mercly 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)
If signing on behalf of amentity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL 10: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314