## P98,000059220

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: MIAMI ON Wheels Inc. (Name of corporation)
DOCUMENT NUMBER: P98000059220
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:
LAZARO GARCIA (Name of contact person)
MIAMION Wheels Inc.
511 NW 795+.
Mi Ami F(-33150 (City/state and zip code)
For further information concerning this matter, please call: 305-2(8-7528
LAZARO GARCIA at 305, 756-1808 (Name of contact person) (Area code & daytime telephone number)
(realing of comment betaom) (when come or distribution in imper)

Enclosed is a \$35.00 check made payable to the Department of State.

Malling Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

## 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: MIAMI ON WheRIS, TAC
2. The principal office address: 541 NW 798+
MiAMI F1 33150
3. The mailing address (if different): SAME AS AGOVE
4. Date of incorporation/qualification: 67 06 98 Document number: P980005926  5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
LAZARO GARGA 541 NW 795T
MIAM FI. 33150
SECR TALLA
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  LAZARO GARCIA  SST  ASST  TO THE ST  TO T
(P.O. Box NOT acceptable)  RAT 22
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)  LAZARO GARCIA  (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)  OS (33/05 (Date)
If signing on behalf of an entity:
(Typed or Printed Name)