# P99000080076

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# COVER LETTER

TO: Amendment Section Division of Corporations

vantarr 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:

Mare of Contact Person				
Name of Contact Person				
Advantage Auro Body Ine. Firm/Company				
13328 NE 17 Ave. Address				
N. Miami, Fl. 33181 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				

For further information concerning this matter, please call:

Chracielg GANBIND Name of Contact Person <u>305</u> <u>891-3279</u> Area Code & Daytime Telephone Number at (\_\_\_

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

CR2E045 (8/05)

## 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  $\underline{Florida}$  \_\_\_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation:	Advantage	Avro Body, mc.	
		17 Ave N. NIAMI, FI. 33181	

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

- 4. Date of incorporation/qualification: Debember 16, 1993 Document number: P98000080076
- 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)

<del></del>	Romina Gambino resigned.	
	155405W 115 terr	
	NIAMI, F1. 33196 EU	10
nd stra	eet address of the new registered agent (if changed) and /or registered office	JAN

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

Rosapio Gambino	SSEE OF
155405W 115terr	FLUI D
P.O. Box NOT acceptable MIAMI, FI. 33196	RIDA

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.

Printed or typed name and title nature of an officer or director

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

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 CR2E045 (8/05)