

P99000063650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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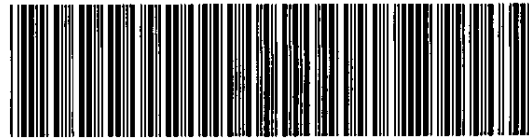
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Rosen 7/5/11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** European and American Motors Corp  
Name of Corporation

**DOCUMENT NUMBER:** P990000 63650

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:

Sandra

Name of Contact Person

European and American Motors Corp.  
Firm/Company

P.O. Box 1868  
Address

O.B. Fl 32175  
City/State and Zip Code

American Motors @ mail. Com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sherry

Name of Contact Person

at ( 386 ) 441-1100

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: EUROPEAN AND AMERICAN MOTORS CORPORATION  
2. The principal office address: 376 S. YOUNG ST ORMOND FL 32174

3. The mailing address (if different): PO BOX 1868 OR FL 32175

4. Date of incorporation/qualification: 7-12-1999 Document number: P 99000063650

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)

ANDRUS SAVIIR  
376 S. YOUNG ST  
ORMOND BEACH FL 32174

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

SANDRA SAVIIR  
376 S YOUNG ST  
ORMOND BEACH FL 32174

P.O. Box NOT acceptable

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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.

Sandra Saviir  
Signature of an officer or director

Sandra Saviir  
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.

Sandra Saviir  
Signature of Registered Agent

6-27-11  
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