

576222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100256237931

02/13/14--01006--006 **35.00

FFR 17 2014
C. CARROTHERS

FILED
14 FEB 13 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FORT LAUDERDALE AUTO LEASING CORP
Name of Corporation

DOCUMENT NUMBER: SN6222

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:

JOSEPH PORCELLI
Name of Contact Person

Firm/Company

2633 MERCER AVE
Address

WEST PALM BEACH, FL. 33401
City/State and Zip Code

JOEY(A)INEEDACARNOW.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH PORCELLI at 954, 275-2942
Name of Contact Person 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

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: FORT LAUDERDALE AUTO LEASING CORP
2. The principal office address: 2633 MERCER AVE WEST PALM BEACH FL 33401
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/26/1991 Document number: S76222

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)

JOSEPH PORCELLI

312 STATE RD BY

FT LAUDERDALE, FL. 33315

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

2633 MERCER AVE

P.O. Box NOT acceptable

WEST PALM BEACH, FL. 33401

FILED
14 FEB 13 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Joseph Porcelli
Signature of an officer or director

JOSEPH PORCELLI President
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.

Joseph Porcelli
Signature of Registered Agent

2/10/2014
Date

If signing on behalf of an entity:

JOSEPH PORCELLI
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