I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

above, or on an attachment with all other like empowered. SIGNATURE: NELSON TELLO

Electronic Signature of Signing Officer/Director Detail

MEDLEY, FL 33166 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

# **Officer/Director Detail :**

Title	PD	Title	TREASURER, DIRECTOR
Name	LYONS, JACK JR	Name	LYONS, II, PATRICK J.
Address	8482 N.W. 96 STREET	Address	8482 N.W. 96 STREET
City-State-Zip:	MEDLEY FL	City-State-Zip:	MEDLEY FL 33166
Title	VP, SECRETARY		
Title Name	VP, SECRETARY LYONS III, JOHN L.		
	,		

#### 8482 N.W. 96 STREET MEDLEY, FL 33166

DOCUMENT# 614781

# **Current Mailing Address:**

8482 N.W. 96 STREET MEDLEY. FL 33166

#### FEI Number: 59-1897294

# Name and Address of Current Registered Agent:

Entity Name: JACK LYONS TRUCK PARTS, INC.

**Current Principal Place of Business:** 

LYONS, JACK JR. 8482 N.W. 96 STREET



FILED Sep 11, 2019 Secretary of State 2051772555CC

Date

Certificate of Status Desired: No

OFFICE MANAGER

Date

09/11/2019