6790 PINES BL	NCIPAL Place of Business: VD. NES, FL 33024		9930854	12366
Current Mai	ling Address:			
6790 PINES PEMBROKE	BLVD. PINES, FL 33024			
FEI Number: 26-0597725		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
TURNER, OTH 1100 S STATE SUITE 200A MARGATE, FL	RD 7			
The above named	l entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Flor	ida.
	entity submits this statement for the purpose of changing its regineration of the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of changing its regineration of the statement for the purpose of the purpose of the statement for the purpose of the pur	stered office or regis	tered agent, or both, in the State of Flor	^{ida.} 05/01/2024
		stered office or regis	tered agent, or both, in the State of Flor	
	COTHEL TURNER Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Flor	05/01/2024
SIGNATURE	COTHEL TURNER Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Flor	05/01/2024
SIGNATURE	OTHEL TURNER Electronic Signature of Registered Agent Ctor Detail :			05/01/2024
SIGNATURE Officer/Direc Title	COTHEL TURNER Electronic Signature of Registered Agent Ctor Detail : PDS	Title	VP	05/01/2024
SIGNATURE Officer/Direc Title Name Address	OTHEL TURNER Electronic Signature of Registered Agent Ctor Detail : PDS HAYDEN, TITUS	Title Name Address	VP HAYDEN, VALDA L	05/01/2024

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: TITUS HAYDEN

PRESIDENT

05/01/2024

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P07000083797

Entity Name: VAL P'S AUTO SERVICE, INC.

FILED May 01, 2024 Secretary of State 9930854123CC

Date