## F0300001367

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## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: Savino Del Bene, U.S.A. Inc. (Name of Corpora	ation)			
DOCUMENT NUMBER: F03000001267				
The enclosed Statement of Change of Registered Office/Age	nt and fee are submitted for filing.			
Please return all correspondence concerning this matter to the	e following:			
David S. Klevatt (Name of Contact I	Person)			
Klevatt & Associates, LLC (Firm/Company)				
33 N LaSalle, Suite 2323 (Address)				
Chicago, Illinois 60602				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
David Klevatt at (Name of Contact Person)	312 ) 782-9090 (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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stati nge is submitted for a corporation organized under the laws of the State of <u>Nev</u> r to change its registered office or registered agent, or both, in the State of Flori	w York
	he corporation: Savino Del Bene, U.S.A. Inc.	aa.
	~ 11 140 10 193DD ST IAMAICA NV 11413	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 03/12/2003 Document number: F030000012	267
	street address of the current registered agent and registered office on file with the timent of State:	ne
	C T Corporation System	क्रा <b>0</b> (201 <b>8</b>
	1200 South Pine Island Road	EAR & T
	Plantation FL 33324	IARY ASSE
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office  Zaira Huerta	ILED 15 PH 2: 03 TARY OF STATE ASSEE, FLORIDA
	8815 NW 33 Street Suite 110 M  (P.O. Box NOT acceptable)  Miami, Florida 33172	·
The street addre	ss of its registered office and the street address of the business office of its rebe identical.	gistered agent,
	s authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	
1/1	re of an officer or director)  The Shein blue (Printed or typed name and title)	VP_
I further agree to of my duties, and document is bein	the appointment as registered agent and agree to act in this capacity, o comply with the provisions of all statutes relative to the proper and comple d I am familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address. I hereby content to been notified in writing of this change.	te performance gent. Or, if this onfirm that the
- Jella (Sig	nature of Registered Agent) (Date)	
If signing on bel	half of an entity:  (a C. Huerk	

\* \* \* FILING FEE: \$35.00 \* \* \*