

M13 960

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

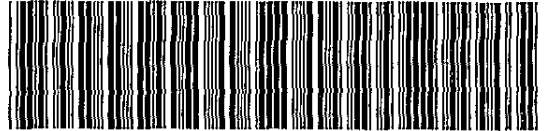
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FILED
05 MAY 27 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/13/05--01029--012 **35.00

Roch
KRG
5/31

BROOKS ♦ HERMELEE ♦ GEFFIN
ATTORNEYS AT LAW

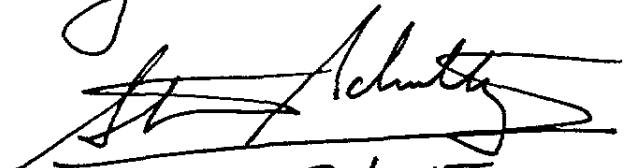
5/25/05

Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Sunlight Foods, Inc.
Ref. # 1413960

Gentlemen:

I return herewith your letter dated 5/20/05, together with the "Statement of Change" reflecting a change of my address as registered agent. The enclosed "Statement of Change" is the original duly signed by me.


STEVEN SCHULTZ

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNLIGHT FOODS INC.

(Name of corporation)

DOCUMENT NUMBER: M13960

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:

STEVEN SCHULTZ, ESQ.

(Name of contact person)

BROOKS, HERMELLE, GEFIN, P.A.

(Firm/Company)

25 S.E. 2ND AVENUE STE 1135

(Address)

MIAMI, FL 33131

(City/state and zip code)

For further information concerning this matter, please call:

ROBERT CONTENTO VP

(Name of contact person)

at (305)

688-5400 X107

(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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 20, 2005

STEVEN SCHULTZ, ESQ.
BROOKE HERMELLE GEFFIN P.A.
25 SW 2ND AVENUE SUITE 1135
MIAMI, FL 33131

SUBJECT: SUNLIGHT FOODS, INC.
Ref. Number: M13960

We have received your document for SUNLIGHT FOODS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE REGISTERED AGENT MUST SIGN AT THE BOTTOM OF THE FORM.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist

Letter Number: 205A00036594

RECEIVED
05 MAY 27 AM 8:00
DIVISION OF CORPORATIONS

**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: SUNLIGHT FOODS INC.
2. The principal office address: 3550 NW 112TH STREET
MIAMI, FL 33167
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4-85 Document number: M13960

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

STEVEN SCHULTZ, ESQ

(THIS IS AN ADDRESS CHANGE ONLY TO THE ADDRESS SHOWN

BELOW.....

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

STEVEN SCHULTZ

BROOKS, HERMELLE GEFFIN P.A.

(P.O. Box NOT acceptable)

25 S.E. 2ND AVENUE STE 1135 MIAMI, FL 33131

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.

(Signature of an officer or director)

ROBERT CONTENTO VP

(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.

(Signature of Registered Agent)

5/25/05
(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