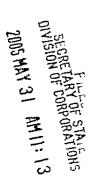
## P04000171545

(Req	uestor's Name)	
(Add	ress)	
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJI	CT: Gabory Trade, Inc. (Name of corporation)
DOCU	MENT NUMBER: P04000171545
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Gabriel Rydz (Name of contact person)
	Gabory Trade, Inc. (Firm/Company)
	20533 Biscayne Blvd., #1240 (Address)
	Aventura, FL 33180
	(City/state and zip code)
For fur	ther information concerning this matter, please call:
Gabrie	Rydz   at (626 ) 705-5341   (Area code & daytime telephone number)
	(Name of contact person) (Area code & daytime telephone number)
Enclos	ed 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

CR2E045(6/04)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is submitted for a corporation organized under the laws of the State of Florida  Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Gabory Trade, Inc.
2. The principal office address: 19501 West Country Club Dr., #2202, Aventura, FL 33180
2. The principal office address: 10007 West Country Clab Dr., #2202, Aventura, 7 E 30100
3. The mailing address (if different): 20533 Biscayne Blvd., #1240, Aventura, FL 33180
4. Date of incorporation/qualification: 1/23/2004 Document number: P04000171545
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Gabriel Rydz
21055 Yatch Club Dr., #1404
Aventura, FL 33180
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Gabriel Rydz
20533 Biscayne Blvd., #1240
(P.O. Box NOT acceptable)
Aventura, FL 33180
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.
Gabriel Rydz, President  Signature of an officer graficetor)  Gabriel Rydz, President  (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further tigree to comply with the provisions of all statutes relative to the proper and complete performance of my dulies, 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.
X Gluv Olyc X 5/26/05 (Signature of Registered Agent) X 5/26/05
If signing on behalf of an entity:
Gabriel Rydz (Typed or Printed Name)

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