## P06000088318

(Requestor's Name)	
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(City/State/Zip/Phone #)	<del></del>
PICK-UP WAIT	MAIL
(Business Entity Name)	
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: KING LATIN FOOD INC. (Name of Alien Business Organization)
Dear Sir or Madam:
The enclosed Statement of Change of Registered Agent/Registered Office for Alien Business Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Helena C Hoyos (Name of Person)
(Name of Person)
(Firm/Company)
1658 W 31 STreeT Place (Address)
Higheat Fl 33012
(City/State and Zip Code)
For further information concerning this matter, please call:
// (Name of Person) at (766) 251-0339  (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
□\$35.00 Filing Fee  □\$43.75 Filing Fee & Certified Copy

INHS23 (08/05)

## 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 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 Flor	
1. The name of the corporation: KINTS LATIN FOOD, INC.	
1. The name of the corporation: KINKT LATIN FOOD, INC.  2. The principal office address: 1658 West 71 Street for Healeah FC 33012	Place.
Healeah FC 33012	-
3. The mailing address (if different): $\mathcal{N}/\mathcal{A}$	
4. Date of incorporation/qualification: 6/24/2006 Document number: PO 60	000 88318
5. The name and street address of the current registered agent and registered office on file with Florida Department of State:	
TAX DEFENSE CONTEX INC	A 6
TAX DEFENSE CONTEVINC  2350 WEST 84 STreet #18 3  Hialeau # 33016	
Hialeau A 33016	A POR BEIN
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	1 8: 35 FINANCE OF THE PROPERTY OF THE PROPERT
Elesta C Hoyos  1658 W 31 STreet Mad  (P.O. Box NOT acceptable)	*
(P.O. Box NOT acceptable)  Higher FL 330/2	
The street address of its registered office and the street address of the business office of its as changed will be identical.	registered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an of authorized by the board, or the corporation has been notified in writing of the change.	fficer so
(Signature of an other or director)  Elena ( (Signature of an other or director)  (Printed or typed name and title	Hoyes
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 comp of my duties, and I am familiar with and accept the obligation of my position as registered accument is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.	
(Signature of Registered Agent)  (Signature of Registered Agent)  (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
CR2E045 (8/05)