P0700001203

| (Requestor's Name) |
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| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
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SECRETARY OF STATE DIVISION OF CORPORATIONS



COVER LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: 305 CARGO SERVICES INC. (Name of Corporation) |
| DOCUMENT NUMBER: P0700067203 |
| 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: |
| ELENA ASTURIAS (Name of Contact Person) |
| (Name of Contact Person) |
| 305 CARGO SERVICES, INC. (Firm/Company) |
| 1962 NW 82ND AVENUE (Address) |
| MAMI, FL 33126 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| ELENA ASTURIAS at (305) 469-3172 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a \$35.00 check made payable to the Department of State. |
| Mailing Address: Amendment SectionStreet Address: Amendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301 |

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. |
|--|
| 1. The name of the corporation: 305 CHRGO SERVICES, INC. |
| 2. The principal office address: 1962 NW 82ND AVENUE |
| MIRMI, FZ 33126 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 8 3 07 Document number: P0700067203 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) |
| ELENA ASTURIAS |
| 7634 SW S5TH AVE, UNITD |
| 20112 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| FLENA ASTURIAS 1962 NW 82M AVENUE F. ARR |
| 1962 NW 82 ND AVENUE (P.O. Box NOT acceptable) |
| MIAMI, To 33/26 |
| 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, of the corporation has been notified in writing of the change. |
| (Signature of an officer or director) ELENA O. ASTURIAS, PRESIDENT (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 potified in writing of this change. |
| (Signature of Registered Agent) W/28/08 (Date) |
| If signing on behalf of an entity: |
| (Typed or Printed Name) |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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