I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MANAGER

SIGNATURE: GINO MALDERA

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P09000103390

Entity Name: GIMAR DISTRIBUTION, INC.

Current Principal Place of Business:

304 INDIAN TRACE 157 WESTON, FL 33326

Current Mailing Address:

304 INDIAN TRACE # 157 157 WESTON, FL 33326 US

FEI Number: 35-2431762

Name and Address of Current Registered Agent:

MALDERA, GINO J 3408 WEST 84TH STREET 100 HIALEAH, FL 33018 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	GINO MALDERA		04/15/2016		
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	Ρ	Title	V		
Name	MALDERA, GINO J	Name	CARRILLO, MARIANA		
Address	3408 WEST 84TH STREET , #100	Address	3408 WEST 84TH STREET , #100)	
City-State-Zip:	HIALEAH FL 33018	City-State-Zip:	HIALEAH FL 33018		

FILED Apr 15, 2016 Secretary of State CC3815957727

Certificate of Status Desired: No

04/15/2016 Date